Overview

The Test Case document is comprised of three tabs.

The first tab is this tab (Overview) and is merely a high-level tab to orient the user in regards to the other tabs. It should not be used to infer, interpret, or assume any logic or values.

The second tab is the test case layout tab which describes the layout of the test cases on the third and final tab.

The third tab are the test cases with one test case per row. All test cases in this file focus on patients who have an underlying condition which would result in an immunity, contraindication, or indication.

Resources

Recommended Immunization Schedule for Persons Aged 0 through 18 years - http://www.cdc.gov/vaccines/schedules/hcp/child-adolescent.html

Recommended Immunization Schedule for Adults Age 19 Years and Older - Recommended Immunization Schedule for Adults Age 19 Years and Older - http://www.cdc.gov/vaccines/schedules/hcp/adult.html

General Recs - MMWR/ January 28, 2011 / Vol. 60 / No. 2 - http://www.cdc.gov/mmwr/preview/mmwrhtml/rr6002a1.htm

IIS Standard Code Sets - http://www.cdc.gov/vaccines/programs/iis/code-sets.html

DTaP - http://www.cdc.gov/vaccines/hcp/acip-recs/vacc-specific/dtap.html

Hep A - http://www.cdc.gov/vaccines/hcp/acip-recs/vacc-specific/hepa.html

Hep B - http://www.cdc.gov/vaccines/hcp/acip-recs/vacc-specific/hepb.html

Hib - http://www.cdc.gov/vaccines/hcp/acip-recs/vacc-specific/hib.html

HPV - http://www.cdc.gov/vaccines/hcp/acip-recs/vacc-specific/hpv.html

Influenza - http://www.cdc.gov/vaccines/hcp/acip-recs/vacc-specific/flu.html

Japanese Encephalitis - http://www.cdc.gov/vaccines/hcp/acip-recs/vacc-specific/je.html

Measles Mumps and Rubella - http://www.cdc.gov/vaccines/hcp/acip-recs/vacc-specific/mmr.html

Meningococcal - http://www.cdc.gov/vaccines/hcp/acip-recs/vacc-specific/mening.html

Pneumococcal - http://www.cdc.gov/vaccines/hcp/acip-recs/vacc-specific/pneumo.html

Polio - http://www.cdc.gov/vaccines/hcp/acip-recs/vacc-specific/polio.html

Rotavirus - http://www.cdc.gov/vaccines/hcp/acip-recs/vacc-specific/rotavirus.html

Tdap/Td - http://www.cdc.gov/vaccines/hcp/acip-recs/vacc-specific/tdap-td.html

Typhoid - http://www.cdc.gov/vaccines/hcp/acip-recs/vacc-specific/typhoid.html

Varicella - http://www.cdc.gov/vaccines/hcp/acip-recs/vacc-specific/varicella.html

Yellow Fever - http://www.cdc.gov/vaccines/hcp/acip-recs/vacc-specific/yf.html

Zoster - http://www.cdc.gov/vaccines/hcp/acip-recs/vacc-specific/shingles.html

Column	Field Name	Description
A	CDC_Test_ID	Simple numerical identifier for the test case.
В	Test_Case_Name	Human-readable test name to briefly describe the test case.
С	DOB	Date of birth of the patient. DOB format: MM/DD/YYYY (e.g., 01/01/2000).
D	Gender	Gender of the patient. Either M or F (Male or Female)
E	Observation_Code_1	Observation Code is the CDSi defined coded value based on ACIP language. See Supporting Data file "ScheduleSupportingData - Coded Observations.xlsx" for the full list.
F	Observation_Text_1	Observation text is the human readable text associated with the code in the previous
G	Observation Date 1	column. Observation Date is the date associated with the observation.
H – M	Observation_Date_1 Observations 2 and 3	
		Observations 2 and 3. This is a repitition of fields E - G.
N	Series_Status	Series Status is the measure of the patients status in relationship to presumed immunity.
0	Date_Administered_1	Date vaccine dose was administered. Date format: MM/DD/YYYY (e.g., 01/01/2000).
Р	Vaccine_Name_1	Human readable trade name or the unspecified formulation of the vaccine.
Q	CVX_1	Coded value to define the type of vaccine. Together with MVX the trade name can be inferred.
R	MVX_1	Coded value to define the manufacturer of the vaccine. Together with CVX the trade
••		name can be inferred. If an unspecified formulation is used, no MVX is specified.
		Expected evaluation status (Valid, Not Valid, Extraneous) of the vaccine dose administered based on the ACIP recommendations. In the case of a combination shot,
S	Evaluation_Status_1	the Expected Evaluation Status is related to the Vaccine Group targeted by the particular
		test case. The other components of the combination vaccine are tested in their
		respective Vaccine Group test cases.
Т	Series_Type_1	Provides the Series Type (Standard or Risk) where the Evaluation Status was determined.
		Provides further information as to why the dose administered was not valid. In the case of a combination shot, the reason is related to the Vaccine Group targeted by the
U	Evaluation_Reason_1	particular test case. The other components of the combination vaccine are tested in their
		specific Vaccine Group test cases.
		Vaccine Doses Administered 2 through 7. This is a repetition of fields O-U
V - BK	Vaccine Doses Administered 2 through 7. This is a repetition of fields O-U	
		Target Dose being forecasted. If Target Doses 1 and 2 have been satisfied, the Target
BL	Forecast_#	Dose Number being forecasted would be Target Dose Number 3. If the patient no longer requires a dose (complete, immune, contraindication), the forecast_# is set to "-".
		Earliest point in time which the next vaccine dose could be administered and still be
ВМ	Earliest_Date	considered valid. This does not include the 4-day grace period. Date format: MM/DD/YYYY (e.g., 01/01/2000).
DAL	December ded Dete	Date at which the next vaccine dose administered should be given. Date format:
BN	Recommended_Date	MM/DD/YYYY (e.g., 01/01/2000).
во	Past_Due_Date	Date at which the patient is considered overdue for their immunization. Date format: MM/DD/YYYY (e.g., 01/01/2000).
		Administrative Guidance is used to provide additional - usual non-computable or overly
ВР	Administrative_Guidance	complex ACIP language - information to the clinician to aid in decision making.
BQ	Vaccine_Group	The Vaccine Group being tested with the test case.
		Assessment Date is the date which should be used during evaluation and forecasting
BR	Assessment Date	rather than the current date. This is used to help with test cases which would become invalid over time.
BS	Evaluation_Test_Type	Evaluation Test Type is used to categorize the test case. This will allow testers to focus in on categories of tests as needed.
ВТ	Date_Added	This is the date the test case was created. The format is MM/DD/YYYY. (e.g.:
		01/01/2000)
BU	Date Updated	This is the date the test case was changed. The format is MM/DD/YYYY. (e.g.: 01/01/2000)
BV	Forecast_Test_Type	Forecast Test Type is used to categorize the test case. This will allow testers to focus on categories of tests as needed.
BW	Reason_For_Change	As test cases are changed, this field is used to document the reason the test case was changed.
вх	Changed_In_Version	This field documents the version number the test case was last changed.

Varicella:	de_1	2	2 3 3 3						S Series T Fealuatio Date, Admin Vaccine CVX, 2 MVX, 2 Evaluatio Series Ty Evaluatio Date, Admin Vaccine CVX, 3 MVX, 3 Evaluatio Series Ty Evaluatio Date, Admin Vaccine CVX, 4 Vpp=1, Reason istered, 2 Name, 2 n. Status, pe, 3 n. Reason istered, 4 Name, 4
Zoster dose administered at									
50 years - 1 5-UC-0012 day 05/29/1965 F	055	Health care personnel		Not Complete	05/28/2015 Zostavax	121		Valid	standard
Anaphylaxis to		Adverse reaction to vaccine				107			
5-UC-0002 previous dose 10/10/2010 F	080	component Encephalopathy		Contraindicated	12/10/2010 DTaP Unspecified	107		Valid	standard
		not attributable to another							
		identifiable cause within 7 days of							
		administration of							
Encephalopath y within 7 days		a previous dose of Tdap, DTP, or							
6-UC-0003 of Pediarix. 02/02/2011 F	079	DTaP vaccine		Not Complete	04/02/2011 PEDIARDX	110	SKB	Valid	standard
Anaphylaxis to		Adverse reaction							
previous dose 6-UC-0004 of Pediarix 10/10/2010 F	080	to vaccine component		Contraindicated	12/15/2010 PEDIARIX	110	SKB	Valid	standard
Anaphylaxis to previous dose		Adverse reaction to vaccine							
6-UC-0005 of Pentacel 06/06/2010 F	080	component		Contraindicated	08/02/2010 PENTACEL	120	PMC	Valid	standard
Anaphylaxis following		Severe allergic reaction after							
previous dose 5-UC-0006 of Influenza 07/04/2013 F	085	previous dose of Influenza		Contraindicated	10/08/2014 Influenza Unspecified	88		Valid	standard
Anaphylaxis to		Severe allergic						-	
previous dose		reaction after							
of Hep A. No 6-UC-0007 forecast. 03/03/2003 F Anaphylaxis to	096	previous dose of Hepatitis A		Contraindicated	03/04/2009 Hep A Unspecified	85		Valid	standard
previous dose of Hep B. No		Severe allergic reaction after							
further	097	previous dose of		Control 1	11/11/2006 05	or.	MSD	Mali *	
6-UC-0008 forecast. 09/09/2006 F Anaphylaxis to	097	Hepatitis B		contraindicated	11/11/2006 RECOMBIVAX-PEDS	UIS	MSD	vand	standard
previous dose		Adverse reaction							
of Pentacel 6-UC-0009 (Hib) 06/06/2010 F	080	to vaccine component		Contraindicated	08/02/2010 PENTACEL	120	PMC	Valid	standard
		Severe allergic							
Anaphylaxis to previous dose		reaction after previous dose of							
6-UC-0010 of HPV Vaccine 05/19/2000 F	090	HPV		Contraindicated	06/19/2011 HPV Unspecified	137		Valid	standard
Anaphylaxis to		Severe allergic reaction after							
previous dose 6-UC-0011 of MCV 02/26/2000 F	095	previous dose of Meningococcal		Contraindicated	Meningococcal MCV4 03/15/2011 Unspecified	147		Valid	standard
Anaphylactic					,,				
reaction to dose 1 of MMR.		Severe allergic							
No forecast for additional		reaction after previous dose of							
6-UC-0012 dose. 08/13/2010 F	091	Measles		Contraindicated	09/02/2011 M-M-R II	03	MSD	Valid	standard
Diagnosis of severe									
immunodeficie		HIV/AIDS -							
ncy. No forecast for		severely Immunocomprom							
6-UC-0013 MMR. 09/10/2011 F	154	ised		Contraindicated					
Anaphylaxis to previous dose		Severe allergic reaction after							
of PCV7. No 6-UC-0014 forecast. 07/11/2007 F	094	previous dose of Pneumococcal		Contraindicated	09/11/2007 PREVNAR 7	100	WAL	Valid	standard
		Severe allergic	Severe allergic						
Anaphylaxis to previous dose.		reaction after previous dose of	reaction to streptomyc						
6-UC-0015 No forecast. 07/24/2011 F	081	Polio 108	in	Contraindicated	09/24/2011 IPOL	10	PMC	Valid	standard
Severe combined									
immunodeficie ncy (SCID)=no		Severe Combined							
rotavirus 6-UC-0016 vaccine 02/01/2012 F	013	Immunodeficiency (SCID)		Contraindicated					
		Severe allergic							
Anaphylaxis following		reaction after previous dose of							
6-UC-0017 previous dose 02/01/2012 F	083	Rotavirus		Contraindicated	04/01/2012 ROTARIX	119	SKB	Valid	standard
Anaphylaxis		Severe allergic reaction after							
Anaphylaxis following 6-UC-0018 previous dose 02/01/2012 F	083	previous dose of Rotavirus		Contraindicated	04/01/2012 ROTATEQ	116	MSD	Valid	standard 05/01/2012 ROTAROX 119 SXB Valid standard
previous usus	U63	Healthcare provider verified		_com withtrated		**0	H-3D	vend	
		history of or							
5-UC-0019 History of VZ 05/01/2004 F Titer of	024	diagnosis of Varicella 04/01/2005 Healthcare		Immune					
immunity to		provider verified							
VZ=series complete or		history of or diagnosis of							
6-UC-0020 exempt 06/01/2005 F	024	Varicella		Immune					
Anaphylactic		Severe allergic reaction after							
reaction to 5-UC-0021 dose 1 of VZ 12/12/2010 F	089	previous dose of Varicella		Contraindicated	03/15/2012 VARIVAX	21	MSD	Valid	standard
				_					
Diagnosis of severe		HIV/AIDS -							
immunodeficie		severely immunocomprom							
6-UC-0022 dose. 12/12/2009 F Diagnosis of	154	ised		Contraindicated	12/20/2010 VARIVAX	21	MSD	Valid	standard
severe immunodeficie									
ncy before		HIV/AIDS -							
administration of any VZ. No		severely Immunocomprom							
S-UC-0023 VZ to be given. 11/18/2010 F Varicella: Patient has	154	ised		Contraindicated					
laboratory		Laboratory Evidence of							
evidence of immunity for		Immunity or confirmation of							
5-UC-0024 Varicella 06/16/1990 F varicella: Patient has a	023	Varicella disease		Immune					
Patient has a Varicella		Healthcare							
		and the second s							
verifiable diagnosis by a		provider verified history of or							

CDC_Test_ID	ender O tii	oserva Observation_Te Observation on_Co xt_1 e_1	n_Dat Observati Observati Observation on_Code_ on_Text_ ate_2 2 2	_D Observati Observati Observati Series_St on_Codeon_Texton_Date 3 3 3 3	tatus Di	ite_Admini Vaccine_Name_1 ered_1	CVX_1	MVX_1	Evaluation _Status_1	Series_T Evaluar ype_1 n_Reas	io Date_Admin Vaccine_ CVX on istered_2 Name_2	_2 MVX_2	2 Evaluatio n_Status_ 2	Series_Ty Evaluatio pe_2 n_Reason _2	Date_Admin Vaccine_ Ci istered_3 Name_3	VX_3 MVX_3	Evaluatio Serie n_Status_ pe_3 3	s_Ty Evaluatio Da n_Reason isti _3	rte_Admin Vaccine_ ered_4 Name_4
Patient has a																			
Herpes Zoster verifiable		Healthcare provider verified																	
diagnosis by a		history of or diagnosis of																	
2016-UC-0026 provider. 06/19/1972 F Varicena:	02	4 Varicella		Immune															
Patient is a healthcare																			
worker with a one-dose																			
history of																			
Varicella 2016-UC-0027 vaccine. 03/28/1968 F	05	Health care 5 personnel		Not Comp	olete	05/28/2015 VARIVAX	21	MSD	Valid	standard									
Varioella: Patient is a																			
healthcare worker with																			
evidence of immunity for		Health care																	
2016-UC-0028 Varicella. 05/20/1968 M Varicena:	05	5 personnel		Complete		07/03/2012 VARIVAX	21	MSD	Valid	standard	07/31/2012 Varivax 21		Valid	standard					
Patient is																			
pregnant, and has not been																			
found to have evidence of																			
immunity for 2016-UC-0029 Varicella. 06/19/1977 F	n	7 Pregnant		Contraind	licated														
		•																	
Zoster Live Vaccine:																			
Anaphylactic reaction to																			
Zoster vaccine																			
components (Gelatin or		Severe allergic reaction to																	
2016-UC-0031 neomycin) 06/16/1955 F	10	7 neomycin		Not Comp	olete														
MMR: Patient is a healthcare																			
worker, born before 1957.																			
has received one dose of the		Health care																	
2016-UC-0032 MMR vaccine. 08/12/1955 F	05	5 personnel		Not Comp	olete	04/30/2015 M-M-R II	03	MSD	Valid	standard									
Patient is 31 years of age,																			
vaccine naive, and seeking																			
protection	-	Patient seeks 1 protection		Not Comp															
Patient is an	00	1 protection		Not Lomp	oiete														
adult seeking protection																			
from Hepatitis A, and has																			
received the first dose of																			
the risk 2 dose		Patient seeks																	
2016-UC-0034 series. 05/27/1978 M Patient is an	00	1 protection		Not Comp	olete	07/01/2016 Hep A, adult	52	MSD	Valid	risk									
adult seeking																			
protection from Hepatitis																			
A, and has received the																			
second dose of																			
the Hep A risk 2- 2016-UC-0035 dose series. 03/17/1991 F Patient is 55	00	Patient seeks 1 protection		Complete		05/01/2016 Hep A, adult	52	MSD	Valid	risk	Hep A, 11/01/2016 adult 52	MSD	Valid	risk					
years of age,																			
has chronic liver disease,																			
and has not																			
received Hepatitis A		Chronic liver																	
2016-UC-0036 vaccine. 04/12/1961 F Patient has	01	5 disease		Not Comp	olete														
Chronic liver disease and has																			
received the first dose of the																			
Hep A risk																			
Twinrix 3 dose 2016-UC-0037 series . 04/12/1961 F	01	Chronic liver 5 disease		Not Comp	olete	08/01/2016 HepA-HepB	104	SKB	Valid	risk									
	-																		
Patient has Chronic liver																			
disease and has																			
received the second dose of																			
the Hep A risk		Chronic liver																	
Twinrix 3 dose 2016-UC-0038 series . 02/15/1967 M Patient nas	01	5 disease		Not Comp	olete	04/01/2016 HepA-HepB	104	SKB	Valid	risk	04/29/2016 HepA-HepB 104	SKB	Valid	risk					
Chronic liver																			
disease and has																			
received all																			
received all three doses of the Man A rick																			
received all three doses of the Hep A risk TWinrix 3 dose 2016-UC-0039 series . 07/25/1966 M		Chronic liver				08/05/2016 Hep A		SKB			09/02/2016 HepA-Hep8 104				02/04/2017 HepA-HepB 10				

CDC_Test_ID	OB Gender	Observ tion_Co de_1	a Observation_Te Observation_Dat Observati Observati Observation_D Observati Observation_X_1 e_1 on_Code_on_Text_ ate_2 on_Code_on_ST_0 2 2 3 3 3	servati Observati Series_Status Text on_Date 3	Date_Admini Vaccine_Name_1 stered_1	CVX_1	MVX_	1 Evaluatio _Status_1	n Series_T Evalua I ype_1 n_Rea _1	atio Date_Admin Vaccine_ ason istered_2 Name_2	CVX_2	MVX_2	Evaluatio Series_Ty Evaluatio Series_Ty Evaluatio n_Status_ pe_2 n_il	luatio Date_Admin Vaccine_ CVX_3 leason istered_3 Name_3	MVX_3	Evaluatio Series_Ty Evaluatio n_Status_ pe_3	Date_Admin Vaccine_ CVX_4 istered_4 Name_4
Public Safety worker and seeks	11/12/1990 M	057	Paids underly to send on the send of the s	Not Complete													
protection and has received the second dose of the TWINTIX 4 dose 2016-UC-0042 series.	13/29/1983 M	001	Patient seeks protection	Not Complete	05/17/2016 Hep B	104	SKB	Valid	risk	05/24/2016 Hep B	104	SKB	Valid risk				
Patient is a Public Safety worker and seeks protection and has received the third dose of the Twinris 4 2016-U-CO43 dose series.	uz/ta/neez M	001	Fallent works profession	Not complete.	05/17/2016 Hep B	104	CVD	Valid	rick	05/24/2016 Hep 8	104	SVD	Valid risk	06/07/2016 Hep 8 104	cha	Walid nick	
Patient is a Public safety worker exposed to blood or infectious body fluids and has received all	aj avj avid in	562		voc Compress.	0,27,200 10,00		360	VIII.0	1100	0.7.47.2020 189.0	107		Valla I I I I I I I I I I I I I I I I I I	0,07,100 mp 0 100	3,0	100	
four doses of the accelerated Twinrix 4 dose 2016-UC-0044 vaccine series. Patient is 50 years of age unvaccinated and is on		057	Pablic saffy the whole regional to blood or infection body fluids	Complete	05/17/2016 Hep B	104	SKB	Valid	risk	05/24/2016 Hep B	104	SKB	Valid risk	06/07/2016 Hep B 104	SKB	Valled risk	Hep B, 06/17/2017 Adult 104
2016-UC-0045 dialysis. C Patient is on dialysis and has received the first dose of the Hep B risk Recombivax 3 dose series	11/17/1966 M	032	Dallyis patent	Not Complete													
2016-UC-0046 vaccine. Patient is on dialysis and has received the second dose of the Hep B risk Recombivax 3 dose series	11/17/1966 M		Dallyis patent		04/22/2016 Hep B, Dialysis					Hep B, 05/20/2016 Dialysis							
2016-UC-0047 vaccine. C Patient is on dialysis, and has received all three doses of the Hep B risk Recombivax 3 dose series	11/17/1966 M		Dallyris patient			44			risk	Heo B.			Valid risk	Нер В,			
Patient is 69 years of age, unvaccinated	14/30/1953 F	032	Dallyis patent	Complete	05/15/2016 Hep B, Dialysis	44	MSD	Valid	risk	06/12/2016 Dialysis	44	MSD	Valid risk	11/12/2016 Dialysis 44	MSD	Valled risk	
with Hep 8, and 2016-UC-0049 is an dialysis. Patient is on dialysis and has received the first dose of the Hep 8 risk Engerius 84- 2016-UC-0050 dose series. raneer is on			Dallysis patient Dallysis patient	Not Complete Not Complete	03/13/2016 Hep B, Adult	43	SKB	Valid	risk								
ratient is on dialysis, and has received the second dose of the Hep Brisk Engerts. B 4- dose 2016-UC-0051 series.		032	Dalysis patient		03/13/2016 Hep B, Adult			Valid		Hep 8, 04/10/2016 Adult	43	SKB	Valid risk				
Patient is on dialysis, and has received the third dose of the Hep B 2016-UC-0052 4-dose series.	12/13/1947 F	032	Dulyris patient	Not Complete	03/13/2016 Hep B, Adult	43	SKB	Valid	risk	Hep B, 04/10/2016 Adult	43	SXB	Valid risk	Hep B, 05/08/2016 Adult 43	SKB	Vallid risk	
Patient is on dialysis and has received all four doses of the Hep B risk Engerox B 4-										Hep B,				Нер В,			Hop B,
2016-UC-0053 dose series. C Patient is 2 years of age, has anatomical or functional asplenia, and has not received any	12/13/1947 F	032	Dalyus patent	Complete	03/13/2016 Hep B, Adult	43	SKB	Valid	risk	04/10/2016 Adult	43	SKB	Valid risk	05/08/2016 Adult 43	SKB	Valid risk	09/08/2016 Adult 43
prior doses of the Hib	17/15/2014 F	160	Anatomical or functional applenia	Not Complete													

CDC_Test_ID	der Obser	va Observation_Te Observation_Dat Observati Observati Observation_D Observati Observati Observati to xt_1	i Series_Status	Date_Admini Vaccine_Name_1	CVX_1	MVX_1	Evaluation Status 1	Series_T Evaluatio	Date_Admin Vaccine_ CVX_2	MVX_2	Evaluatio Series_Ty Evaluatio	Date_Admin Vaccine_ CVX_3	MVX_3 E	valuatio Series_Ty Evaluatio Date_Admin Vaccine CVX_	4
Patient is 2	de_1	.o x_1	-	stered_1			_Status_1	ype_i n_keason _1	istered_2 Name_2		n_Status_ pe_2 n_Reason 2 _2	stered_3 Name_3	3	_3	
years of age and has anatomical or															
functional asplenia and has received one dose of the		Anatomical or													
Hib Risk 2 dose 2016-UC-0055 series vaccine. 07/15/2014 F	160	functional	Not Complete	08/15/2016 PRP-T	48	PMC	Valid	standard							
years of age and has anatomical or															
functional asplenia and has received															
the second dose of the Hib Risk 2 dose		Anatomical or functional													
2016-UC-0056 series. 07/15/2014 F months of age, has Persistent	160	asplenia	Complete	08/08/2016 PRP-T	48	PMC	Valid	standard	10/03/2016 PRP-T 48	PMC	Valid risk				
complement, properdin, or factor B															
deficiency and has received only one dose															
of the Hib vaccine before 12 months of		Persistent complement, properdin, or													
2016-UC-0057 age. 08/10/2014 F Patient is a child that has	151	factor B deficiency	Not Complete	01/10/2015 PRP-OMP	49	MSD	Valid	standard							
Persistent complement, properdin, or															
factor B deficiency and has received															
one dose of the Hib standard vaccine before 12 months of															
age, and one dose of the Hib risk child 2		Persistent complement,													
dose series 2016-UC-0058 vaccine. 08/10/2014 F Patient is a	151	properdin, or	Not Complete	01/10/2015 PRP-OMP	49	MSD	Valid	standard	04/13/2016 PRP-OMP 49	MSD	Valid risk				
child that has Persistent complement,															
properdin, or factor B deficiency and															
has received one dose of the HIb standard															
vaccine before 12 months of age, and two															
doses of the Hib risk child 2 dose series		Persistent complement, properdin, or													
2016-UC-0059 vaccine. 08/10/2014 F Patient is 36 months of age,	151	factor B deficiency	Complete	01/10/2015 PRP-OMP	49	MSD	Valid	standard	04/13/2016 PRP-OMP 49	MSD	Valid risk	06/08/2016 PRP-OMP 49	MSD V	risk risk	
has anatomical or functional asplenia and															
has received two dose of the Standard															
Hib vaccine before 12 2016-UC-0060 months of age. 04/22/2013 M	160	Anatomical or functional asplenia	Not Complete	06/10/2013 PRP-T	48	PMC	Valid	standard	07/08/2013 PRP-T 48	PMC	Valid standard				
Patient is 36 months of age, has anatomical															
or functional asplenia and has received															
two previous doses of the Standard Hib															
vaccine before 12 months of age and a dose															
of the Hib risk child 2 dose 2016-UC-0061 series vaccine. 04/22/2013 M	160	Anatomical or functional aspleria	Complete	06/10/2013 PRP-T	48	PMC	Valid	standard	07/08/2013 PRP-T 48	PMC	Valid standard	05/14/2016 PRP-T 48	PMC V	alid risk	
Patient is 7 years of age, has not															
received any Hib vaccine, and is															
undergoing elective 2016-UC-0062 splenectomy. 06/22/2009 M	002	Undergoing elective splenectomy	Not Complete												
years and is undergoing															
elective splenectomy and has received the															
received the one dose Hib risk 1 dose 2016-UC-0063 series 06/22/2009 M	002	Undergoing elective splenectomy	Complete	07/01/2016 PRP-OMP	49	Men	Valid	risk							
	002							-							
Patient is 19 years of age is undergoing															
elective splenectomy and has no history of		Undergoing													
receiving Hib 2016-UC-0064 vaccine 07/10/1997 F	002	elective	Not Complete												

	DOB Gender	Observa tion_Co	Observation_Te Observation_Dat Observation Observation_Dat Observation Observation_Dat Observation_Dat	ervati Series_Status Date_	Date_Admini Vaccine_Name_1 stered_1	CVX_1	MVX_	_Status	on Series_1 _1 ype_1	n_Reason istered_2 Name_2	CVX_2	MVX_2	n_Status_	pe_2 n_Reas	n istered_3 Name_3	CVX_3 MV	VX_3 Eval n_S	iluatio Series_Ty Evalu Status_ pe_3 n_Re	satio Date_Admin Va eason istered_4 Na
Patient is 19 years of age and undergoing elective splenectomy		ue_i								- *			-	-*			3	_3	
and has received the			Indergoing																
Hib risk 1 dose			fective																
Patient is 12	07/10/1997 F	002	plenectomy	Complete	08/03/2016 PRP-OMP	49	MSD	Valid	risk										
years of age, has HIV																			
infection, and unvaccinated			IIV/AIDS - not everely																
with Hib	04/23/2003 F		mmunocomprom sed	Not Complete															
2016-UC-0066 vaccine C Patient is 12 years of age,	54/23/2003 1		RM.	NOT COMPLETE															
has HIV infection, and			MV/AIDS - not																
has received			everely																
the Hib risk 1 2016-UC-0067 dose series. C Patient is 4	04/23/2003 F	155	mmunocomprom sed	Complete	02/03/2016 PRP-OMP	49	MSD	Valid	risk										
years of age, a																			
recipient of a successful																			
hematopoletic stem cell			tecipient of a sematopoletic																
transplant 6			term cell ransplant	Not Complete															
2016-UC-0068 months ago. C rauchis is a child that is a	38/14/2010 M	004	ranspiant	Not Complete															
recipient of a																			
successful hematopoletic																			
stem cell transplant and			teciplent of a																
has a dose of the Hib			rematopoietic tem cell																
2016-UC-0069 vaccine. 0	08/14/2010 M	004	ransplant	Not Complete	09/19/2014 PRP-T	48	PMC	Valid	standard										
child and a recipient of a																			
successful hematopoletic																			
stem cell transplant and																			
has received			leciplent of a																
two doses of the Hib risk 3-			sematopoletic tem cell																
1016-UC-0070 dose series. 0	04/09/2006 M	004	ransplant	Not Complete	09/19/2014 PRP-T	48	PMC	Valid	standard	10/17/2014 PRP-T	48	PMC	Valid	risk					
Patient is a																			
child is a recipient of a																			
successful hematopoletic																			
stem cell transplant, and																			
has received all																			
three doses of the Hib risk 3			tecipient of a																
dose series 6 to 12 months post			rematopoletic tem cell																
016-UC-0071 operation. C	05/28/2004 M	004	ransplant	Complete	06/01/2014 PRP-T	48	PMC	Valid	standard	06/29/2014 PRP-T	48	PMC	Valid	risk	07/27/2014 PRP-T	48 PM	AC Vali	id risk	
Patient is 20 years of age																			
and is a recipient of a																			
successful																			
hematopoletic stem cell																			
transplant and has not receive			tecipient of a																
recommended doses of the			rematopoletic tem cell																
2016-UC-0072 HIB vaccine. 0	05/13/1996 M	004	ransplant	Not Complete															
Patient is an adult recipient																			
of a successful hematopoletic																			
stem cell																			
transplant, and has received			tecipient of a																
the first dose of the Hib Risk 3			rematopoletic tem cell																
1016-UC-0073 dose series. 0	05/13/1996 M	004	ransplant	Not Complete	07/25/2016 PRP-T	48	PMC	Valid	risk										
adult recipient of a successful																			
hematopoletic stem cell																			
transplant, and has received																			
the second dose of the Hib			lecipient of a sematopoletic																
Risk 3 dose	or in time		tem cell	New Co. 11	07/17/2017 007 7	40		100		00/	40	Da AC	and in	at a la					
016-UC-0074 series. C	05/13/1996 M	004	ransplant	Not Complete	07/25/2016 PRP-T	48	PMC	Valid	risk	08/22/2016 PRP-T	48	PMC	valid	Hall.					
adult recipient of a successful																			
hematopoietic																			
stem cell transplant, and																			
has received all three doses of			tecipient of a sematopoletic																
the Hib Risk 3	05/13/1996 M	004	tem cell	Complete	07/25/2016 PRP-T	48	PMC	Valid	risk	08/22/2016 PRP-T	48	PMC	Valid	risk	09/19/2016 PRP-T	48 PM	MC Vali	lid risk	
016-UC-0075 dose series. C Patient is 9 years of age,	, 101		•		/					,22,2020 110-1	-				,,		*410		
female, has a history of																			
sexual abuse/assault																			
and has not																			
received the 016-UC-0076 HPV vaccine. 0	04/04/2007 F	169	listory of sexual buse or assault	Not Complete															
Patient is a 9																			
years of age, female, has a																			
history of																			
sexual																			
abuse/assault,																			
abuse/assault, and has received the		169	listory of sexual buse or assault	Not Complete	12/15/2016 9vHPV	165	MSD	Valid	standard										
abuse/assault, and has received the first close of the	04/04/2007 F																		
abuse/assault, and has received the first dose of the 2016-UC-0077 HPV vaccine. years of age,	04/04/2007 F																		
abuse/assault, and has received the first dose of the HPV vaccine. Course of age, female, has a history of	04/04/2007 F																		
abuse/assault, and has received the first dose of the first dose of the vaccine. years of age, female, has a history of sexual abuse/assault,	04/04/2007 F																		
abuse/assault, and has received the first dose of the PV vaccine. C years of age, female, has a history of sexual abuse/assault, and has	04/04/2007 F																		
abuse/assault, and has received the first done of the 016-UC-0077 HTV-vaccine. vears of age, female, has a history of sexual abuse/assault, and has received the second done of	04/04/2007 F																		
abuse/assault, and has received the first dose of the 016-U-C-007 HPV vaccine. years of age, female, has a history of sexual abuse/assault, and has received the	04/04/2007 F		fotory of sexual																

me	DOB Gende	tion_C	o xt_1 e_1 o	bservati Observati Observatio n_Code_ on_Text_ ate_2	on_Code_ on_Text_ on_Date 3 3 3	-	stered_1			_Status_:	1 ype_1 n	Reason istered_2 Na	me_2		n_Status	_ pe_2 n_Reaso	n istered_3 Nan	ne_3		n_Status_ pe_3 n_Reason ister	red_4 Name_4
		de_1	2	2	3 3 3						-	1			2	_2				3 _3	
Patient is 11																					
years of age, female, has a																					
history of																					
sexual																					
abuse/assault,																					
and has																					
received two																					
doses of the HPV risk female			History of sexual																		
16.LIC.0079 2 dose series	03/03/2005 F	169	abuse or assault			Complete	12/19/2016 9vHPV	165	MSD	Valid	standard	06/01/2017 9v	IPV 165	MSD	Valid	risk					
16-UC-0079 2 dose series Patient is 9	03/03/2003 1	103	about or assault			Compress	22/23/2020 34111 4	103	HIJD	Valla	Juliania	00/01/101/ 54		MUD	VIIII	Tuk.					
years of age,																					
male, has a history of																					
sexual																					
abuse/assault,																					
and has not																					
received the			History of sexual																		
16-UC-0080 HPV vaccine.	02/15/2007 M	169	abuse or assault			Not Complete															
years of age,																					
male, has a																					
history of T- Lymphocyte,																					
and has																					
received three																					
doses of the			T-lymphocyte [cell-																		
HPV risk male 3			mediated and																		
dose series	03/13/2006 M	149	humoral] - Partial defects			Complete	05/17/2016 9vHPV	165	MCD	Valid	etandard	06/14/2016 9v	IDV 100	MSP	Wallet	rick	11/01/2016 0-4	pv 165	MCD	Valid risk	
	03/13/2000 M	140	Western Control of the Control of th			Complete	ONTHIOD DALLA	103	N13L/	Vallo	Standard	00/14/2016 9/	- 4 199	MISU	Valle	1 14%	11/01/2016 9VH	. 100	Mau	vanna 115K	
years of age, male, has a																					
history of																					
sexual																					
abuse/assault,																					
and has																					
received the																					
2nd dose of the Risk Male 2																					
dose HPV																					
vaccine at 4			History of sexual																		
16-UC-0084 weeks.	01/13/2007 M	169	abuse or assault			Not Complete	04/21/2016 9vHPV	165	MSD	Valid	standard	05/19/2016 9v	IPV 165	MSD	Valid	risk					
Patient is an																					
adult male,																					
MSM, and has no previous																					
history of the			Men who have sex																		
16-UC-0085 HPV vaccine.	02/02/1994 M	036	with men			Not Complete															
Patient is an																					
adult male,																					
MSM, and has																					
received his																					
first dose of the			Men who have sex																		
16-UC-0086 HPV vaccine.	02/02/1994 M	036	with men			Not Complete	07/21/2016 9vHPV	165	MSD	Valid	standard										
Patient is an																					
adult male,																					
MSM, and has																					
received the																					
second dose of the HPV risk																					
adult male 3			Men who have sex																		
16-UC-0087 dose series. Patient is an	01/23/1988 M	036	with men			Not Complete	04/03/2014 4vHPV	062	MSD	Valid	standard	05/01/2014 4v	IPV 062	MSD	Valid	risk					
ratient is an																					
adult male, MSM, and has																					
received all																					
three doses of																					
the HPV risk																					
adult male 3-			Men who have sex																		
16-UC-0088 dose series.	us/01/1990 M	036	with men			Complete	03/28/2015 4vHPV	062	MSD	Valid	standard	04/25/2015 4v	mrv 062	MSD	Valid	risk	09/14/2015 4vH	'V 62	MSD	Valid risk	

Fatient is 32
years of age
and plans on
traveling to an
endome, are

[for togger than
] Incentive root)

Apparent

Longer term (e.g.,
(for togger than a Longer term (e.g.,
(for togger

Fatient is an adult traveling to an endemic area with incomplete and incomplete a

Japanese Encephalitis,
Not Complete 08/15/2016 VC 134 VAL Valid risk

Patient is an adult travelin to an endemi	8																							
area with Japanese Encephalitis i	or																							
longer than a month, and h received the	as																							
second dose the Japanese Encephalitis risk 2 dose	of		Longer-term (e.g., 1 month or more) travel to a JE-										Japanese											
risk 2 dose 2016-UC-0091 series vaccine Patient is 6	. 09/10/1983 M	165	travel to a JE- endemic area				Not Complete	Japanese Encephalitis, 04/28/2016 VC	134	VAL 1	Valid	risk	Japanese Encephal 05/25/2016 s, VC	134	VAL	Valid	risk							
months of ag and plans to travel with																								
parent from the U.S. for international																								
travel and ha not received the Measles			Travelling																					
2016-UC-0092 (MMR) vaccin Patient is 6		048	Internationally				Not Complete																	
months of ag and is still traveling with	=																							
parents from the U.S. for international travel and ha	i																							
received the Measles (MN risk 1-dose 2016-UC-0093 vaccine serie	R)		Travelling																					
2016-UC-0093 vaccine serie Patient is an adult with perinatal HIV		048	Internationally				Not Complete	08/28/2016 MMR	03	MSD \	Valid	risk												
infection wh does not have			Persons with perinatal HIV Infection who do																					
evidence of severe Immunosupp	re		not have evidence of severe																					
ssion and wh was vaccinate with MMR	ed		immunosuppressi on and who were vaccinated with MMR before																					
before establishmen of antiviral 2016-UC-0094 therapy		026	establishment of antiviral therapy	120	of antiviral therapy	06/12/2016	Not Consolute	05/12/1997 MMR		MSD \	traited.	standard	05/12/2000 MMR		MED.	soulid.								
Patient is an adult with perinatal HIV		020	(ent)	110	(ent)	00/11/1010	nos comprese	03/11/137 WWW		mad .	*****	Juli Juli G	03/11/1000 WWW	03	WILD .	Valla	Julius G							
infection who does not have evidence of																								
severe Immunosupp ssion and wh	re		Persons with																					
was vaccinati with MMR before establishmen			Persons with perinatal HIV Infection who do not have evidence																					
establishmen of antiviral therapy who has received his first dose			of severe immunosuppressi on and who were																					
his first dose the second round of MM	of R		vaccinated with MMR before establishment of antiviral therapy		Begin Date of antiviral therapy	06/12/2016																		
2016-UC-0095 vaccines. Patient is an adult with	05/12/1996 F	026	(ART)	120	[ART]	06/12/2016	Not Complete	05/12/1997 MMR	03	MSD \	Valid	standard	05/12/2000 MMR	03	MSD 1	Valid	standard	12/12/2016 MMR	03	MSD	Valid	risk		
perinatal HIV infection wh																								
evidence of severe immunosupp	re																							
ssion and wh was vaccinate with MMR	ed		Persons with perinatal HIV infection who do																					
before establishmen of antiviral therapy and	t		not have evidence of severe immunosuppressi																					
has received the second dose of the			on and who were vaccinated with MMR before		Begin Date																			
second round of MMR 2016-UC-0096 vaccine. Patient is 18		026	establishment of antiviral therapy (ART)	120	of antiviral therapy [ART]	06/12/2016	Complete	05/12/1997 MMR	03	MSD \	Valid	standard	05/12/2000 MMR	03	MSD 1	Valid	standard	12/12/2016 MMR	03	MSD	Valid	risk	01/12/2017 MMR	03
years of age and is seeking protection																								
against strain of Men B 2016-UC-0097 disease.		001	Patient seeks protection				Not Complete																	
years of age and is seekin																								
protection against strain of Men B disease and h	as																							
received the first dose of the Men B			Patient seeks					07/04/2016 meningococcal B. OMV																
2016-UC-0098 series. years of age	07/04/1998 M	001	protection				Not Complete	ur/04/2016 meningococcal B, OMV	163	PFR \	valid	risk												
protection against strain of Men B																								
disease and h received the second dose the Men B	of												menicaco	:0										
dose vaccine 2016-UC-0099 series.		001	Patient seeks protection				Complete	07/04/2016 meningococcal B, OMV	163	PFR \	Valid	risk	meningo ccal B, 01/04/2017 OMV	163	PFR 1	Valid	risk							

CDC_Test_ID	r Observa Observation_Te Observation_Dat Observati Observati Observation_D Observati Observation_ton_Co xt_1 e_1	Observati Series_Status	aatio Date_Admin Vaccine_ CVX_2 MVX_2 Evaluatio Series_Ty Evaluatio In_Status_ pe_2 n_Rication_ 2 2 2	uatio Date_Admin Vaccine_ CVX_3 MVX_3 Evaluatio Series_Ty Evaluatio series_Ty Evaluatio series_Ty Evaluatio series_Ty Evaluatio n_Status_pe_3 n_Rea	atio Date_Admin Vaccine_ CVX_4 son istered_4 Name_4
Patient is 10 years of age, has anatomical or functional asplenia and has not		ال ا	2 _2	a <u>a</u>	
received the Meningococcal 2016-UC-0100 B vaccine. 03/28/2006 M	Anatomical or functional 160 applenia	Not Complete			
Patient is 10 years of age, has anatomical or functional asplenia, and has received the first dose of	Acutomical or				
the Men B risk 2016-UC-0101 2-dose vaccine. 03/28/2006 M Patient is a microbiologist routinely	functional 160 asplenia Microbiologists	Not Complete 03/28/2016 meningococcal 8, OMV 163 NOV Valid risk			
exposed to Neisseria 2016-UC-0103 Meningitidis. 10/01/1976 F	routlinely exposed to Neisseria 050 meningtidis	Not Complete			
Futient is a microbiologist microbiologist and properties of the second to Nessensa Menoggida excellent the first dose of the first dose of the	Microbiologiss routinity exposed to Nesseria	meningococcal B.			
2016-UC-0104 Men 8 vaccine 10/01/1976 F Microbiologist routinelly exposed to Neisseria Mexingitidis and has received the	OSO menengilidis Microbiologists	Not Complete 06/23/2016 recombinant 162 PFR Valid risk	тепідосо		
second dose of the Men B Irisk 2016-UC-0105 3 dose series sweet our infant with anatomical or functional applications and has not received	routinely exposed to Nessoria 050 meningfolds Audiomical or	meningozoczał 8, Nox Complete 06/23/2016 recombinant 162 PFR Valid risk	ccill, Cccill, 107/21/2016 nt 162 PFR Valid risk		
Metingoccal 2016 UC-0107 vaccine. Graners aus indica with application and has received the first dose of the Metingoccal ACMY risk start	functional splema Adutomical or	Not Complete			
before 7 2016-UC-0108 months series. 20/14/2015 M executs via an interest of the control of the control application and has received the second dose of the Meningococcal ACMY risk start	functional supplema supplema Adultomical or	Meningozocal, Not Complete 04/34/2015 MCV4O 136 MCV Valid risk	Meningoo		
before 7 2016-UG Clotherseine. 02/14/7015 M infare stift functional asplenia and has receive the their doos of the the Clotherseine Clotherseine ACMY risk start before 7	functional 160 asplema	Meningcoccal, Not Complete 64/24/2015 MCV40 136 NCV Valid risk	O6/09/2015 MC/44O 136 NOV Valid risk	Meningsco	
months 4-dose 2016-UC-010 is reires	Asalomical or functional functional applies aspless	Meningscoccal, Not Complete 04/24/2015 MCV4O 336 MOV Valid risk	Meningsoc Cost, O6/EN/2013 MCV4O 136 NOV Valid risk	ccal, . GB(04/2013 MCV40 136 NOV Valid risk	
ACMY risk start before 7 2016-UC-0111 mooths seed. 02/14/2015 M yet rold child who has functional start completed the primary doses, and has received the	Anatomical or functional supplemental and supplemental su	Meningococcal, Not Complete 64/24/2015 MCV40 136 NCV Valid risk	Meningsoc col, O6/09/2013 MCV4G 136 NOV Valid risk	Meningsco col. CBK/04/2013 MCV4O 136 NOV Valid risk	Moningoco co., C2/14/2016 MCV4Q 136
first booster does at 3 years 2016-UC-0112 later. GB/23/2013 M year lad shid who has functional asplinta and the 3 year booster does as well at the 5 year booster does of the	Asatomical or functional supplemental supple	Meningococal, Not Complete 30/23/2013 MCV4O 136 NOV Valid risk	Meningsco col, 12/18/7012 MCV4O 136 NOV Valid risk	Meningsco CI (00/22/2013 MC/440 136 NOV Valid risk	Meningoco co., col/23/2013 MC/40 136
Meningococcal ACWY risk start before 7 2016-UC-0113 months series. 01/01/2007 M	Anatomical or functional 160 asplenia	Meningococcal, Not Complete 03/01/2007 MCV40 136 NOV Valld risk	Meringoco ccal, 04/26/2007 MCV4O 136 NOV Valid risk	Meningoco ccal, 06/21/2007 MCV4O 136 NOV Valid risk	Meningoco ccal, 01/01/2008 MCV4O 136

CDC_Test_ID Test_Case_Na DOB	B Gender	Observ	ra Observation_Te Observation	n_Dat Observe	rati Observati Obse	ervation_D Observati Ob	Observati Observati S	eries_Status	Date_Admini Vaccine_Name_1	CVX_1	MVX_1	Evaluation	Series_T Evaluation	Date_Admin Vacc	ine_ CVX_2	MVX_2	Evaluatio Series_T	y Evaluatio Da	te_Admin Vaccin	e_ CVX_3	MVX_3 Eval	uatio Series_Ty	Evaluatio Date_/	Admin Vaccine_	CVX_4
me 7 month old infant (with no		tion_Ci de_1	o xt_1 e_1	on_Cod 2	de_on_Text_ ate_	2 on_Code_ on 3 3	n_Text_ on_Date_ 3		Date_Admini Vaccine_Name_1 stered_1			_Status_1	ype_1 n_Reaso _1	n istered_2 Nam	e_2		n_Status_ pe_2 2	n_Reason ist _2	ered_3 Name_	.3	n_Si 3	atus_ pe_3	n_Reason istered _3	I_4 Name_4	
previous history of Meningococcal vaccine) at risk																									
for Meningococcal disease during			Persons at risk																						
a community	/10/2015 F	070	during an				N	lot Complete																	
Patient is a 7 month old infant and is at																									
risk during a community outbreak of																									
Meningococcal disease and has received the																									
first dose of the Meningococcal ACWY risk start			Persons at risk																						
after 7 months 2016-UC-0115 2 dose vaccine. 05/ Patient is a 12	/10/2015 F	070	during an outbreak				N	lot Complete	Meningococcal, 12/10/2015 MCV40	136	NOV	Valid	risk												
months old and was at risk during a community																									
outbreak of Meningococcal disease and has																									
received the second dose of the																									
Meningococcal ACWY risk start after 7 months			Persons at risk during an						Meningococcal,					ccal,	ngoco										
2016-UC-0116 2 dose vaccine. 05/ 2 month old infant, with persistent	/10/2015 F	070	outbreak				N	lot Complete	12/10/2015 MCV40	136	NOV	Valid	risk	05/10/2016 MCV	10 136		Valid risk								
complement deficiencies, and has not			Persistent																						
received any Meningococcal 2016-UC-0117 vaccine. 07/	7/28/2015 M	151	complement, properdin, or factor B deficiency				N	lot Complete																	
Adult with no known history of																									
meningococcal vaccination and has anatomical			Anatomical or																						
adult with	I/18/1992 M	160	functional asplenia				N	lot Complete																	
anatomical or functional asplenia and																									
has received the first dose of the Meningococcal																									
dose series	1/18/1992 M	160	Anatomical or functional asplenia				N	lot Complete	Meningococcal, 05/02/2016 MCV4O	136	NOV	Valid	risk												
adult with anatomical or functional																									
asplenia and has received the second																									
dose of the Meningococcal ACWY risk 2 dose series			Anatomical or functional						Meningococcal,					Meni ccal,	ngoco										
2016-UC-0125 vaccines. 04/ Patient is a first	i/18/1992 M	160	asplenia				N	lot Complete	05/02/2016 MCV40	136	NOV	Valid	risk	06/27/2016 MCV	10 136	NOV	Valid risk								
year college student living in a residence hall and has																									
received the Meningococcal ACWY risk 1			College students living in residence																						
2016-UC-0127 dose series. 01/	/17/1997 F	046	halls				0	omplete	01/17/2016 Meningococcal, MC	CV4P 114	PMC	Valid	risk												
Patient is 60 years of age (vaccine naive)																									
and at risk during a Meningococcal			Persons at risk during an																						
2016-UC-0128 outbreak. 03/ Patient is 60 years of age, at	I/07/1956 M	070	outbreak				N	lot Complete																	
risk during a Meningococcal outbreak, and																									
has received the Meningococcal			Persons at risk																						
risk 1 dose 2016-UC-0129 vaccine. 03/ Patient is pregnant, and	I/07/1956 M	070	during an outbreak				N	lot Complete	05/23/2016 Meningococcal, MP	PSV4 32	PMC	Valid	risk												
at 27 weeks of gestation, and has not																									
received the Pertussis 2016-UC-0130 vaccine (Tdap) 06/ Patient is	i/23/1988 F	007	Pregnant	170	Onset of pregnancy 08/2.	2/2016	N	lot Complete																	
pregnant, at 27 weeks of gestation, and																									
has received a 2016-UC-0131 Tdap 06/ Laboratory	i/23/1988 F	007	Pregnant	170	Onset of pregnancy 08/2.	2/2016	G	Complete	03/01/2017 Tdap	115	SKB	Valid	risk												
worker who handles specimens that																									
might contain Polio and has completed a Polio standard			Laboratory																						
series, but has not received any additional			workers who handle specimens that might contain																						
2016-UC-0132 doses. 11/	/23/1977 M	054	polioviruses				N	lot Complete	01/23/1978 IPV	10	PMC	Valid	standard	02/20/1978 IPV	10	PMC	Valid standard		1/23/1978 IPV	10	PMC Valid	l standard	02/0:	2/1982 IPV	10

CDC_Test_ID Test_Case_Na DOB	Gender Observa Observation_Te Observatio	on_Dat Observati Observati Observati	on_D Observati Observati Observati Series_Statu	s Date_Admini Vaccine_Name_1	CVX_1 MVX_1 Evaluation Series_T Evaluatio Date_Admin Vaccine_ CVX_2	MVX_2 Evaluatio Series_Ty Evaluatio Date_Admin Vaccine_ CVX_3	MVX_3 Evaluatio Series_Ty Evaluatio Date_Admin Vaccine_ CVX_4
me	tion_Co xt_1 e_1	on_Code_ on_Text_ ate_2	on_Code_ on_Text_ on_Date_	stered_1	_Status_1 ype_1 n_Reason istered_2 Name_2	n_Status_ pe_2 n_Reason istered_3 Name_3	n_Status_ pe_3
	de_1	2 2	3 3 3		_1	2 _2	3 _3

Patient is a laboratory																
worker who																
handles specimens that																
might contain Polio and has																
completed a Polio standard		Laboratory workers who														
dose series and the additional		handle specimens that might contain														
2016-UC-0133 risk dose. 11/23/1977 M	054	polioviruses	Complete	01/23/1978 IPV	10 PM	Valid	standard	02/20/1978 IPV 10	PMC	Valid	standard	11/23/1978 IPV 10	PMC	Valid s	standard	02/02/1982 IPV 10
years of age, with no																
previous history of the																
polio vaccine, and plans on																
traveling to areas or		Travel to areas or														
countries		countries where														
where polio is 2016-UC-0134 endemic. 08/10/1961 F	143	polio is epidemic or endemic	Not Complete													
Patient is traveling to																
areas or countries																
where polio is																
endemic and has received		Travel to areas or														
the first dose of the polio risk		countries where polio is epidemic														
2016-UC-0135 adult vaccine. 08/10/1961 F rations to traveling to	143	or endemic	Not Complete	09/05/2016 IPV	10 PM	Valid	risk									
areas or																
countries where polio is																
endemic and has received																
the second dose of the		Travel to areas or countries where														
polio risk adult	143	polio is epidemic or endemic	Not Complete	09/05/2016 IPV	10 PM	Valid	risk	10/03/2016 IPV 10	na ac	Valid	alah.					
2016-UC-0136 vaccine. 08/10/1961 F rations to traveling to	143	or engeniic	Not Complete	05/05/2016 IFV	U PM	valid	TISK	10/03/2016 IFV 10	PMC	Valid	T D.K.					
areas or countries																
where polio is an epidemic																
and has																
received all three doses of		Travel to areas or countries where														
the polio risk 2016-UC-0137 adult vaccine. 08/10/1961 F	143	polio is epidemic or endemic	Complete	09/05/2016 IPV	10 PM	Valid	risk	10/03/2016 IPV 10	PMC	Valid	risk	04/03/2017 IPV 10	PMC	Valid r	risk	
Patient is a Rables																
Researcher																
with previous history of																
Rables vaccine, but has been																
tested and found to have a								Rabies, intramuscu				Rables, intramuscu				
fallen serum 2016-UC-0138 titer. 02/16/1982 F	053	Rables researchers	Not Complete	Rables, intramuscular 06/28/2015 injection	175 NO	/ Valid	risk	lar 07/05/2015 injection 17	rs NOV	Valid	risk	lar 07/19/2015 injection 175	NOV	Valid r	risk	
Patient is a Rables																
Patient is a Rables Researcher with previous																
Patient is a Rables Researcher with previous history of Rables vaccine,																
Patient is a Rables Researcher with previous history of Rables vaccine, but has a confirmed test																
Patient is a Rables Researcher with previous history of Rables vaccine, but has a confirmed test of a fallen																
Patient is a Rubles . Researcher . Researcher . Researcher . Rubles vaccine, but has a confirmed test . of a falles . de falles . and has a received a tax service of a . 																
Patient is a Rables Researcher with previous Habes watching to this a confirmed text of a fallen serum stee and has received a the habes risk the h								Rabies,				Rables,				Rables,
Fatient is a flables and shales flables flable		Rabes		Bables, Intramuscular				intramuscu Iar	ar Angu	No. 14		intramuscu lar				Intramuscu lar
Pattent is a stables. Market and the stable of the stable of the stable of with previous history of father vaccine, but has a of a failer serum ofter and has received a booster dose of the stable of the stable of discount of d				Bables, Intramuscular		/ Valid	risk	intramuscu	'S NOV	Valid	risk	intramuscu		Valid r	risk	intramuscu
Fatient is a flables and shales flables flable		Rabes		Bables, Intramuscular		/ Valid	risk	intramuscu Iar	'S NOV	Valid	risk	intramuscu lar			risk	Intramuscu lar
Fattent is a Rables Researcher Researcher Researcher Researcher Researcher Researcher Researcher Researcher Rables vaccine, but has a confirmed test of a failer and last received a booster dose of the Rables risk 3-dose Confirmous 2016-UC-0139 series. C2/16/1982 F		Rabes		Bables, Intramuscular		/ Valid	risk	intramuscu Iar	rs nov	Valid	nsk	intramuscu lar			risk	Intramuscu lar
Faltent is a flables shades with previous history of flables vaccine, but on a flable vaccine, but of flables vaccine, but on a flable vaccine, but on a failer serum site and but received of the flables risk 3-dose continuous 2016-UC-0139 Genes. 02/16/1982 F		Rabes		Bables, Intramuscular		/ Valid	risk	intramuscu Iar	'S NOV	Valid	nsk	intramuscu lar			risk	Intramuscu lar
Patient is a flables state of the previous history of flables yacroling with previous history of flables yacroling to the previous history of flables yacroling to the previous confirmed test of a failer serum titler and has received at the flables risk a diose continuous 2016 UC 0139 series. C02/18/1882 F		Rables researchers		Bables, Intramuscular		/ Valid	risk	intramuscu Iar	rs nov	Valid	nsk	intramuscu lar			risk	Intramuscu lar
Futient is a flables. As a flable is a flable is the state of the stat		Rabies, researchers		Bables, Intramuscular		/ Valid	risk	intramuscu Iar	rs nov	Valid	nok	intramuscu lar			risk	Intramuscu lar
Fattent is a Rables State of the Control of the Con	053	Rabies, researchers	Not Complete	Bables, Intramuscular		/ Valid	risk	intramuscu Iar	rs nov	Valid	risk	intramuscu lar			risk	Intramuscu lar
Patient is a flables state of the previous history of flables vaccine, which previous history of flables vaccine, and the previous confirmed test of a fallen serum site and has received a flable of the flables risk. 3 -done confirment of the flables risk. 3 -done confirment with no previous history of the flables risk. 2016-UC-0199 series. 02/26/1982 F	053	Rabies, researchers	Not Complete	Bables, Intramuscular		/ Valid	risk	intramuscu Iar	rs Nov	Valid	risk	intramuscu lar			rnk	Intramuscu lar
Patient is a flables state of the previous history of flables vaccine, but has a constitution of flables vaccine, but has a constitution of flables vaccine, but has a constitution of a fallen serum titer and has received at the flables risk a diose continuous cont	053	Rabies, researchers	Not Complete	Bables, Intramuscular		/ Valid	risk	intramuscu Iar	rs nov	Valid	risk	intramuscu lar			risk	Intramuscu lar
Fattent is a flables which will be previous history of flables vaccine, but has a late that the previous history of flables vaccine, but has a late test of a failine serum little and has received a booster dose of discher service. 2016-UC-0119 service. 2021/6/1982 F New Rabines Researcher with no previous flables vaccine. 09/21/1986 M Patient is a new flables fleesarcher and has received the first dose of discher service.	053	Rubles researchers Rubles researchers	Not Complete	Rabbes, intramuscular GB/28/7015 espection	175 NO			intramuscu Iar	is nov	Valid	nok	intramuscu lar			rak	Intramuscu lar
Patient is a flables state of the previous history of flables vaccine, but only a flable state of flables vaccine, but only a flables vaccine, but only a flable vaccine, but only a flable vaccine and has received a flable of flables vaccine. 2016-UC 0139 series. 02/16/1882 F New Rables Received by Flatent is a new Rables vaccine. 03/21/1886 M Patient is a new Rables vaccine. 03/21/1886 M Patient is a new Rables vaccine. 03/21/1886 M Rables decided by Rables vaccine. 03/21/1886 M Rables vaccine. 03/21/1886	053	Rabies, researchers	Not Complete Not Complete	Rabbes, intramuscular GB/28/7015 espection	175 NO			intramuscu Iar	'S NOV	Valid	risk	intramuscu lar			risk	Intramuscu lar
Pattent is a Bables state of the Pattent is a Bables state of the Pattent is a Bables state of the Pattent is a Bables state of a failer serum little and has received at the Rables risk 3 -done continuous and the Pattent is a Continuous 2016-UC 0139 series. 027/15/1582 F New Rables Received the Sables state of the Rables risk 3 -done continuous and the Pattent is a new Rables state of the Rables risk 3 -done continuous the Pattent is a new Rables state of the Rables risk 3 -done continuous the Rables	053	Rables researchers Rubles researchers	Not Complete Not Complete	Rables, intramucular CA(2N/2015 epictors	175 NO			intramuscu Iar	rs nov	Valid	risk	intramuscu lar			rek	Intramuscu lar
Pattent is a Bables state of the Sables rate of Sables r	053	Rables researchers Rubles researchers	Not Complete Not Complete	Rabbes, intramuscular GB/28/7015 espection	175 NO			intramuscu Iar	rs nov	Valid	risk	intramuscu lar			rsk	Intramuscu lar
Fattent is a flables with the previous history of flables vaccine, but has a large with previous history of flables vaccine, but has a large with the vaccine, but has a large with the vaccine, but has a large with the vaccine, but has a booker doe of the large with the vaccine continuous continuous continuous continuous continuous continuous previous flables flates vaccine, on previous flates with no previous flates vaccine, on previous flates flates with the flat doe of the flat doe of the flat doe of the vaccine series. 2016-UC-0164 vaccine series. 2016-UC-0174 vacc	053	Rables researchers Rubles researchers	Not Complete Not Complete	Rabbes, intramuscular GB/28/7015 espection	175 NO			intamasca Jar 07/85/2015 injection 17	יסא איז	Valid	risk	intramuscu lar			rak	Intramuscu lar
Fathers is a flables state of the flables and the flables watched with previous history of flables watched with previous history of flables watched wa	053	Rables researchers Flables researchers Flables researchers	Not Complete Not Complete	Rables, into amuscular 66/28/2015 rejection : : : : : : : : : : : : : : : : : : :	175 NO			Información per de la composición del composición de la composición de la composición de la composición del composición de la composición del composición de la composición del composición del composición del composición del composición del composición del composic	rs nov	Valid	risk	intramuscu lar			rzsk	Intramuscu lar
Fathers is a flables with the previous history of Rubbes vaccine, but has a series of flables vaccine, but has a series and has received a boocear door of a failer serum site and has received a boocear door of door service. 2016-UC-0199 series. 02/18/1982 F New Rables Researcher with no many common services of the continuous of the common services of the flables vaccine. 09/21/1986 M Patient is a new Rables. Researcher and has received the habbes risk. 3-door continuous continu	053 053	Nubles researchers Rubles researchers Rubles researchers	Not Complete Not Complete Not Complete	Sables, intramuscular (64/28/2015 spectors) Sables, intramuscular (64/26/2016 spectors)	75 NO	= Valid	risk	Informacio Salar (7/65/2015 Injection 17 Rables, Intermodics)				intramuscu lar			rnk	Intramuscu lar
Fathers is a flables state of the flables search, and a flables search, and a flable search s	053 053	Nubles researchers Rubles researchers Rubles researchers	Not Complete Not Complete Not Complete	Sables, Intramucular (64/28/2015 spection of spection of spection of spection of spection of specific	75 NO		risk	Información per de la composición del composición de la composición de la composición de la composición del composición de la composición del composición de la composición del composición del composición del composición del composición del composición del composic				intramuscu lar			nok	Intramuscu lar
Patient is a flables state of the previous history of flables vaccine, and the previous history of flables vaccine, and the previous confirmed test of a failien serum site and has received at the flables risk. 3 -done confirmous confirmous confirmous value of the flables risk. 3 -done confirmous value of the flables risk. 3 -done previous history of the flables risk. 3 -done confirmous value of the flables risk. 3 -done confirmous value of the flables risk. 3 -done flables risk received the first done of the flables risk. 3 -done of the flables risk received the first done of the flables risk received the fla	053 053	Nubles researchers Rubles researchers Rubles researchers	Not Complete Not Complete Not Complete	Sables, intramuscular (64/28/2015 spectors) Sables, intramuscular (64/26/2016 spectors)	75 NO	= Valid	risk	Informacio Salar (7/65/2015 Injection 17 Rables, Intermodics)				intramuscu lar			rok	Intramuscu lar
Pattent is a Bables Market Mar	053 053	Nubles researchers Rubles researchers Rubles researchers	Not Complete Not Complete Not Complete	Sables, intramuscular (64/28/2015 spectors) Sables, intramuscular (64/26/2016 spectors)	75 NO	= Valid	risk	Informacio Salar (7/65/2015 Injection 17 Rables, Intermodics)				intramuscu lar			resk	Intramuscu lar
Patient is a Bables was a state of the previous history of Rabbes vaccine, but has a state of a failer serum site and has received a bocoster door of a failer serum site and has received a bocoster door of discharge of the serum site and has received a bocoster door of discharge of the serum site and has received a bocoster door of discharge of the serum site and has received a bocoster door of discharge of the serum of discharge of the serum of the serum of discharge of the serum	053 053	Nubles researchers Rubles researchers Rubles researchers	Not Complete Not Complete Not Complete	Sables, intramuscular (64/28/2015 spectors) Sables, intramuscular (64/26/2016 spectors)	75 NO	= Valid	risk	Informacio lar 07/05/2015 Injection 17 Rubles, Internancio 05/21/2016 Injection 17				Internace Intr G77392033 injection 175			risk	Intramuscu lar
Fathers is a Rables Rab	053 053 053	Rubies researchers Rubies researchers Rubies researchers Rubies researchers	Not Complete Not Complete Not Complete	Rubies, intramucular 66/28/2015 injection Rubies, intramucular 66/16/2016 injection Rubies, intramucular 67/16/2016 injection	775 NO7	Ellev =	risk risk	Informacio	rs PMC	Valid	risk	Internace Internace Internace Internace Internace Internace Internace Internace	NOV	Valid r		Intramuscu lar
Pattent is a Bables Market Mar	053 053 053	Rables researchers Fables researchers Fables researchers	Not Complete Not Complete Not Complete	Rables, intramucoular OR/28/2015 espection Rables, intramucoular OR/28/2016 espection Sables, intramucoular OR/28/2016 espection	775 NO7	Ellev =	risk risk	Informacio lar 07/05/2015 Impetion 17 Rubles, Informacio 05/71/2016 Injection 17	rs PMC	Valid	risk	Intermocal Intr (07/19/2023 injection 175	NOV	Valid r		Intramuscu lar
Pattent is a Bables Manager of the Manager of Manager o	053 053 053	Rubies researchers Rubies researchers Rubies researchers Rubies researchers	Not Complete Not Complete Not Complete	Rubies, intramucular 66/28/2015 injection Rubies, intramucular 66/16/2016 injection Rubies, intramucular 67/16/2016 injection	775 NO7	Ellev =	risk risk	Informacio	rs PMC	Valid	risk	Internace Internace Internace Internace Internace Internace Internace Internace	NOV	Valid r		Intramuscu lar
Fattent is a Rables Rables State of the Rables	053 053 053	Rubies researchers Rubies researchers Rubies researchers Rubies researchers	Not Complete Not Complete Not Complete	Rubies, intramucular 66/28/2015 injection Rubies, intramucular 66/16/2016 injection Rubies, intramucular 67/16/2016 injection	775 NO7	Ellev =	risk risk	Informacio	rs PMC	Valid	nok	Internace Internace Internace Internace Internace Internace Internace Internace	NOV	Valid r		Intramuscu lar
Fathers is a flables with previous history of flables watched watch	053 053 053	Rubies researchers Rubies researchers Rubies researchers Rubies researchers	Not Complete Not Complete Not Complete	Rubies, intramucular 66/28/2015 injection Rubies, intramucular 66/16/2016 injection Rubies, intramucular 67/16/2016 injection	775 NO7	Ellev =	risk risk	Intramuco Intr	rs PMC	Valid	nok	Intermuces	NOV	Valid r		Intramuscu lar
Patient is a Bables Market Mar	053 053 053	Rubies researchers Rubies researchers Rubies researchers Rubies researchers	Not Complete Not Complete Not Complete Not Complete	Rubies, intramucular 66/28/2015 injection Rubies, intramucular 66/16/2016 injection Rubies, intramucular 67/16/2016 injection	.75 PM	C Valid	risk risk	Informacio	S PMC	valid Valid	risk	Intramucus Intra (77/59/2013 injection 175 Bables, intramucus Int	NOV	Valid r	nok	Intramuscu lar

CDC_Test_ID	Te Observation_Dat Observati Observati Observation_D Observati Obs	eries_Status Date_Admini \ stered_1	Vaccine_Name_1 CV	VX_1 MVX_1	Evaluation Ser _Status_1 ype	ies_T Evaluatio Date_A t_1 n_Reason istered	dmin Vaccine_ CVX_2 _2 Name_2	MVX_2	Evaluatio Series_Ty n_Status_ pe_2	Evaluatio Date_Admin V n_Reason istered_3 N	accine_ CVX_3 N ame_3	IVX_3 Evaluatio n_Status_	Series_Ty Evaluatio pe_3 n_Reason	Date_Admin Vaccine_ CVX_4 istered_4 Name_4
Animal handler with previous history of the months of the control of the both has been tested and found to have a fallen enrum titer and has received the the fallen rich the fallen rich is den frequent			Rabies, intramuscular				Rabies, intramuscu lar			R II	ibles, tramuscu r			Rables, intramuscu lar
2016-UC-0145 series. 01/12/1990 F 061 Animal handle Patient is 46		ot Complete 06/18/2015 i	injection 17	75 PMC	Valid risk	06/25	2015 injection 175	PMC 1	Valid risk	07/09/2015 ir	jection 175 Pi	MC Valid	risk	07/19/2017 injection 175
years of age Tavel to area and travelling which there is to an area at recognized ris risk of exposure exposure to S. 2016 UC-0166 to S. Typh. 04/19/1970 M 163 to S. Typh. 04/19/1970 M 163	.a. k. of	iot Complete												
Fatient is	s in a of		Typhold capsular polysaccharide 10	o1 PMC	Valid risk									
Two years later, patient continues to travel to an area rain of epopose to 5. Travel to an area rain of epopose to 5. Travel to an area rain of epopose to 5. Travel to area freezived the booster dose of the "Pythod recognized ris 1. dose 2016 U-COL4 Series. 04/19/1970 M 163 type 1	s in a of		Tvehold caosular	D1 PMC			Typhoid capsular polysacha (2018 ride 101	PMC 1	Valid risk					
Microbiology laboratorium who works frequently with and the second of th														
received the laboratorians Typholid work frequent 2016-UC-0149 vaccine. 10/15/1980 M 051 with 5. typhi	dy	iot Complete												
Fallert is a microbiology laboratorium who works frequenty with 5 typis carrier Microbiology received the laboratorium work frequenty with 5 typis carrier Microbiology received the laboratorium work frequent Typhold work frequent 2016-UC-0150 vaccine. 10/15/7880 M GS1 with 5 typis	who dy	of Complete 08/16/2016 :	Typhoid oral, live, attenuated 25	5 PMC	Valid risk									
Police In 9.2 years of age and to swelling to a country at Travel to area	sat													
risk for Yellow risk for Yellow Feet 2016-UC-0151 transmitosion. 07/01/1964 F 152 transmission		ot Complete												
Patient to		omplete 09/01/2016 \	Yellow Fever 37	7 PMC	Valid risk									

CDC_Test_ID Test_me	st_Case_Na DO	B Gender	Observ tion Cr	a Observation_Te Observation_L	Dat Observati Observati Observation on Code on Text ate 2	_D Observati Observati Observati on Code on Text on Date	Series_Status	Date_Admini Vaccine_Name_1 stered 1	CVX_1	MVX_1	Evaluation Status 1	Series_T Evaluation	Date_Admin Vaccine_ n istered 2 Name 2	CVX_2 N	MVX_2 E	Evaluatio Series	Ty Evaluatio Date_Admin Vaccine_ CVX_3 n_Reason istered_3 Name_3 _2	MVX_3	Evaluatio Series_T	y Evaluatio Date_Admin Vaccine_ CVX_4 n Reason istered 4 Name 4
No.	with		de_1	-	2 2	3 3 3						_1			2	2	_2		3	_3
000	thlear plants, and																			
has	an omplete																			
rec	edule (only eived 1 dose																			
the	months) of PCV 13	1/08/2013 M		Cochlear implants																
	ient is 3	1/08/2013 M	011	Cocniear implants			Not Complete	05/08/2013 PCV 13	133	PFK	Valid	standard								
coc	irs old with thlear																			
rec	olants, has eived one ndard dose																			
of t	the PCV 13 les and has																			
rec firs	eived the t dose of the																			
2016-UC-0154 dos		1/08/2013 M	011	Cochlear implants			Not Complete	05/08/2013 PCV 13	133	PFR	Valid	standard	02/12/2016 PCV 13	133 P	PFR \	/alid risk				
coc	irs old with thlear																			
has	plants, and received e standard																			
dos	se of the / 13 series																			
and	f has eived the																			
the	ond dose of risk 2-5																			
2016-UC-0155 ser		1/08/2013 M	011	Cochlear implants			Not Complete	05/08/2013 PCV 13	133	PFR	Valid	standard	02/12/2016 PCV 13	133 P	PFR \	/alid risk	04/08/2016 PCV 13 133		Valid Risk	
yea	ient is 4 irs old with thlear																			
imp	plants, has eived three																			
dos PCV	ies of the /13 vaccine,																			
of t	d one dose the PPSV23												12/13/2012 PCV 13				05/17/2013 PCV 13 133			
2016-UC-0156 vac Pat yea	irs of age	5/17/2012 M	011	Cochlear implants			Not Complete	09/27/2012 PCV 13	133	PFR	Valid	standard	12/13/2012 PCV 13	133 P	PFK V	/alid risk	05/17/2013 PCV 13 133	PHK OF WAL	valid risk	05/21/2016 PPSV23 33
cigi	d smokes arettes and																			
rec	not eived the 5V23																			
2016-UC-0157 vac	cine. 0	3/08/1997 F	042	Smoke cigarettes			Not Complete													
sm	irs of age, okes arettes and																			
	received																			
Pne	rumococcal c 1 dose																			
2016-UC-0158 vac of a	age with	3/08/1997 F	042	Smoke cigarettes			Not Complete	04/16/2016 PPSV23	33	MSD	Valid	risk								
flui	ebrospinal d leaks and																			
rec	not eived ccine																			
nair nor	ve)PCV13 PPSV23			Cerebrospinal																
2016-UC-0159 vac	cine. 0	9/14/2008 M	010	fluid leaks			Not Complete													
yea and	irs of age i has																			
flui	ebrospinal d leaks and received																			
the vac	PCV13 cine but not																			
the 2016-UC-0160 vac	PPSV23 cine. 0	9/14/2008 M	010	Cerebrospinal fluid leaks			Not Complete	09/14/2016 PCV 13	133	PFR	Valid	risk								
Pat yea	ient is 8 irs of age, i																			
cer	ebrospinal d leaks and																			
has	received a se of the PCV																			
oft	and a dose the PPSV23			Cerebrospinal																
2016-UC-0161 vac	cine. 0	9/14/2008 M	010	fluid leaks			Not Complete	09/14/2016 PCV 13	133	PFR	Valid	risk	11/09/2016 PPSV 23	33 N	MSD \	/alid risk				
and	irs of age i has																			
flui	ebrospinal d leaks and received a																			
dos PPS	ie of the SV23 vaccine																			
2016-UC-0162 PC	not the	3/16/2001 F	010	Cerebrospinal fluid leaks			Not Complete	05/02/2016 PPSV 23	33	MSD	Valid	risk								
and	irs of age i has																			
flui	ebrospinal d leaks and received																			
the dos	second se of the																			
Pne	rumococcal c 2-dose																			
2016-UC-0163 seri		3/16/2001 F	010	Cerebrospinal fluid leaks			Not Complete	05/02/2016 PPSV 23	33	MSD	Valid	risk	06/27/2016 PCV 13	133 P	PFR \	/alid risk				
yea has	irs of age, cochlear																			
has	plants, and received PPSV23																			
	cine but not	5/01/1977 M	011	Cochlear implants			Not Complete	08/01/2016 PPSV 23	33	MSD	Valid	risk								
yea	ient is 39 irs of age, cochlear																			
imp rec	plants, has eived the																			
PC\ one	/13 vaccine e year after																			
2016-UC-0165 vac	PPSV23 cine dose. 0	5/01/1977 M	011	Cochlear implants			Not Complete	08/01/2016 PPSV 23	33	MSD	Valid	risk	08/01/2017 PCV 13	133 P	PFR \	/alid risk				

Test_ID Test_Case_Na DOB Gender me	Observa Observa tion_Co xt_1 de_1	ation_Te Observation_Dat Observati Observati Observation_D e_1 on_Code_ on_Text ate_2 2 2 2	Observati Observati Observati Series_Status on_Code_ on_Text_ on_Date_ 2 2 2	Date_Admini Vaccine_Name_1 stered_1	CVX_1	MVX_1 I	Evaluation _Status_1	Series_T Evaluation	Date_Admin Vaccine_ n istered_2 Name_2	CVX_2	MVX_2	Evaluatio n_Status_	Series_Ty Evaluatio pe_2 n_Reasor	Date_Admin Vaccin istered_3 Name_	e_ CVX_3 _3	MVX_3	Evaluatio n_Status_	Series_Ty Evalua pe_3 n_Rea 3	tio Date_Admin Vaccin son istered_4 Name_	e_ CVX_4 4
Patient is a two year old child with sickle cell disease, who has completed the PCV 13	ue_i		3 3 3					÷				2	÷				3	-3		
vaccine standard series but has not received a dose of the PFSV 23 of the PFSV 23 over 1, 1 of the PFSV 23 over 1, 1 of the PFSV 25 over 1, 1 of t	Anatomic functiona 160 asplenia		Not Complete	05/21/2010 PCV 13	133	PFR \	Valid	standard	07/21/2010 PCV 13	133	PFR	Valid	standard	09/21/2010 PCV 13	133	PFR	Valid	standard	05/21/2012 PCV 13	133
completed the FOV.13 standard vaccine series, and has received a dose of FFSV3.3 UC.015 series. 03/11/2010 F Patient it now 11 years of age, has side cell	Anatomic functiona 160 asplenia	al .	Not Complete	05/21/2010 PCV 13	133	PFR V	Valid	standard	07/21/2010 PCV 13	133	PFR	Valid	standard	09/21/2010 PCV 13	133	PFR	Valid	standard	05/21/2012 PCV 13	133
disease, has completed the PCV 13 standard vaccine series, received the first and 5 year booster dose of C-0168 PPSV23 series. 03/21/2010 F	Anatomic functiona 160 asplenia	al	Not Complete	05/21/2010 PCV 13	133	PFR \	Valid	standard	07/21/2010 PCV 13	133	PFR	Valid	standard	09/21/2010 PCV 13	133	PFR	Valid	standard	05/21/2011 PCV 13	133
Palient is 9 years of age, has HIV infection, and has only received a dose of PPSY23 vaccine but has not received a dose	HIV/AIDS severely																			
of the PCV 13 UC-0169 vaccine. 04/13/2007 M Patient is 9 years of age, has HIV infection, and has received a	Immunoc 155 ised	promprom	Not Complete	06/01/2016 PPSV 23	33	MSD \	Valid	risk												
dose of PF9/23 vaccine and a dose of the PCV 13 vaccine a Vic 0170 weeks later. O4/13/2007 M Patient is now 14 years of age, has HV infection, and has received two doses (one	HIV/AIDS severely immunoc 155 ised		Not Complete	06/01/2016 PPSV 23	33	MSD \	Valid	risk	07/27/2016 PCV 13	133	PFR	Valid	risk							
Is booster dose 5 years later) of PFSV23 and a dose of IC-0171 PCV13. 04/13/2007 M	HIV/AIDS severely immunoc 155 ised		Not Complete	06/01/2016 PPSV 23	33	MSD \	Valid	risk	07/27/2016 PCV 13	133	PFR	Valid	risk	06/01/2021 PPSV 2:	3 33	MSD	Valid	Risk		
Patient is 22 years of age and has General malignant enoplasm and has received a dose of PSV23 06/13/1994 M	Generaliz malignari 156 neoplasm	nt	Not Complete	08/21/2016 PPSV 23	33	MSD \	Valid	risk												
Patient is 22 years of age with General malignant neeplasm and har received a dose of PFSV33 and a dose 06/13/1994 M 06/13/1994 M	Generaliz malignam 156 neoplasm	nt		08/21/2016 PPSV 23		Mrs	Valid		08/21/2017 PCV 13		0.00	nolla.								
Patient is 27 years of age and has General malignant neoplatum, has received a 2 doses of	Generaliz	zed	NO. Complete	00/11/2010 FF39/23	33	MSD 1	valid	TDA	U6/21/2017 PCV 13	133	rra	Valid	TOX.							
Patient is 14 years of age and have been seen and seen an	malignari 156 neoplasm	т п	Not Complete	08/21/2016 PPSV 23	33	MSD \	Valid	risk	08/21/2017 PCV 13	133	PFR	Valid	risk	08/21/2022 PPSV 2:	3 33	MSD	Valid	risk		
doses of the PPSV23 vaccine but has not received a dose C-0175 of PCV13. 04/04/2002 F	Persisten complem properdir 151 factor B d	nent, n. or	Not Complete	04/16/2011 PPSV 23	33	MSD \	Valid	risk	04/16/2016 PPSV 23	33	MSD	Valid	risk							

years of age	de_1		2	ati Observati Observation_D Observati Observati Observati Observation_D on_Code_ on_Text_ on_						-*			-	_2					
years or age and has Persistent																			
Component, properdin, or																			
Factor B																			
deficiency, has previously																			
received 2 doses of the																			
PPSV23 vaccine and has																			
received a dose of PCV13		Persistent complement,																	
vaccine 8		properdin, or																	
-UC-0176 weeks later. 04/04/2002 F	151	factor B deficiency			Not Complete	04/16/2011 PPSV 23	33	MSD	Valid	risk	04/16/2016 PPSV 23 33	MSD	Valid	risk	06/11/2016 PCV 13	133	PFR	Valid Risk	
Patient is 25																			
years of age																			
with nephrotic syndrome, has																			
previously received two																			
doses of PPSV23 vaccine																			
but has not received a dose																			
of the PCV13		Nephrotic																	
-UC-0177 vaccine. 07/02/1986 M Patient nas nephrotic	167	Syndrome			Not Complete	08/03/2006 PPSV 23	33	MSD	Valid	risk	08/03/2011 PPSV 23 33	MSD	Valid	risk					
syndrome, has																			
received two doses of the																			
PPSV vaccine and a dose of																			
the PCV13 -UC-0178 vaccine 07/02/1986 M	167	Nephrotic Syndrome			Not Complet-	08/03/2006 PPSV 23	33	MSD	Valid	risk	08/03/2011 PPSV 23 33	McD	Valid	risk	08/03/2012 PCV 13	133	PFR	Vallel Risk	
traveler who	407	-y-arsens			No. complete		3	m3D	vend	. 1.4%	anyonyaona (FSV 23 - 35	HOD.	vellu		Juyosyautz PCV 13			1000	
plans to spend a month or																			
longer in an endemic area																			
and has																			
experienced a severe allergic				Longer- term (e.g.,															
reaction after previous dose		Severe allergic reaction after		1 month or more)															
of Japanese Encephalitis		reaction after previous dose of Japanese		travel to a JE-endemic		Jananere Enrech-Heli													
5-UC-0179 vaccine. 12/10/1977 M	082	Encephalitis	165	JE-endemic area	Contraindicated	Japanese Encephalitis 05/15/2016 VC	134	VAL	Valid	risk									
traveler who plans to spend																			
a month in an endemic area																			
and has had an																			
adverse reaction to a				Longer- term (e.g.,															
vaccine component of				1 month or more)															
Japanese		Adverse reaction to vaccine		travel to a JE-endemic		Iganous Paris 1 100													
Encephalitis 5-UC-0180 vaccine. 08/19/1981 F ratient is an	080	to vaccine component	165	JE-endemic area	Contraindicated	Japanese Encephalitis 11/01/2015 VC	134	VAL	Valid	risk									
animal handler																			
with no previous																			
history of the Rabies																			
-UC-0181 vaccination. 09/24/1976 M	061	Animal handlers			Not Complete														
Patient is an animal handler																			
and has received the																			
first dose of the Rabies risk 3																			
dose frequent						Rables - IM Diploid ce	ell												
S-UC-0182 vaccine series. 09/24/1976 M Patient is an	061	Animal handlers			Not Complete	08/01/2016 culture	1/5	NOV	Valid	risk									
animal handler																			
and has received the																			
second dose of the Rabies risk											Rabies - IM								
3 dose frequent i-UC-0183 vaccine series. 09/24/1976 M	061	Animal handlers			Not Complete	Rabies - IM Diploid ce 08/01/2016 culture	ll 175	NOV	Valid	risk	Diploid cell 08/08/2016 culture 175	NOV	Valid	risk					
Patient is an																			
animal handler and has																			
received three doses of the																			
Rabies risk 3											Rables - IM				Rabies - IN				
dose frequent -UC-0184 vaccine series. 09/24/1976 M	061	Animal handlers			Not Complete	Rables - IM Diploid ce 08/01/2016 culture	175	NOV	Valid	risk	Diploid cell 08/08/2016 culture 175	NOV	Valid	risk	Diploid cel 08/22/2016 culture		NOV	Valid Risk	
Patient is a																			
veterinarian staffer and has																			
experienced a severe allergic																			
reaction after previous dose		Severe allergic reaction after		Veterinaria															
of Rables -UC-0185 vaccine. 05/13/1984 F	113	previous dose of	060	ns and their staff	Control of the	Rabies - IM Diploid ce 07/29/2016 culture	ell 170	MC**	volid	rick									
	115	resort2	ubU	tener sidli	contraindicated	ovizalizate culture	1/5	NUV	vand	108.									
Patient has																			
adverse																			
reaction to Rabies vaccine		Adverse reaction to vaccine		Veterinaria ns and		Rables - IM Diploid ce	ell.												
-UC-0186 component 03/17/1986 F	080	component	060	their staff	Contraindicated	01/13/2016 culture	175	NOV	Valid	risk									
				country with a															
Patient has				Yellow Fever															
experienced a severe allergic				vaccination entry															
reaction to egg		Allergic reaction		requireme															
5-UC-0187 protein. 12/15/1968 M	101	to egg protein	045	nt	Contraindicated														
Patient is a																			
microbiology laboratorian																			
who works frequently with																			
S.Typhi Carrier and has																			
received the																			
Risk 4 dose vaccine series		Microbiology laboratorians who									Typhoid capsular								
and the 5 year		work frequently				Typhoid capsular					polysaccha								

CDC_Test_ID Test_Case_N	la DOB Gender	Observ	a Observation_Te Observation_I	Dat Observa	ati Observati Observation_	_D Observa	ti Observati Observa	iti Series_Status	Date_Admini Vaccine_Name_1	CVX_1	MVX_	1 Evaluation	on Series_T Eval	luatio Date_Adm	nin Vaccine_ C	VX_2 MV	X_2 Evaluat	io Series_Ty	Evaluatio Date	_Admin Vaccine_ C	VX_3 MVX	_3 Evaluat	tio Series_Ty Eva	luatio Date_Admi	Vaccine_ CVX_4
me raumii b a		tion_C de_1	xt_1 e_1	on_Cod 2	le_ on_Text_ ate_2 2	on_Code	e_ on_Text_ on_Date 3 3	-	stered_1			_Status_	_1 ype_1 n_R _1	eason istered_2	Name_2		n_Statu 2	ıs_ pe_2	n_Reason ister _2	ed_3 Name_3		n_Statu 3	us_ pe_3 n_F _3	teason istered_4	Name_4
microbiology laboratorian who has					Microbiolo gy																				
experience a severe allergio reaction after			Severe allergic		gy laboratoria ns who work																				
previous dose of Typhoid			reaction after previous dose of		frequently with S.				Typhoid capsular																
2016-UC-0189 vaccine	10/08/1972 M	084	Typhoid	051	typhi			Contraindicated	08/15/2016 polysaccharide	101	PMC	Valid	risk												
Patient is 22 years of age smokes and																									
has asthma ar has not	bn																								
received the Pneumococca 2016-UC-0190 risk dose.	07/22/1994 M	027	Asthma	042	Smoke cigarettes			Not Complete																	
Patient is a smoker, has																									
asthma and hi received the																									
Pneumococca risk 1 dose 2016-UC-0191 series. Fattent is a	07/22/1994 M	027	Asthma	042	Smoke cigarettes			Not Complete	10/13/2016 PPSV 23	33	MSD	Valid	risk												
smoker, has diabetes, and																									
asthma and hi not received the	as																								
Pneumococca risk 1 dose							Smoke																		
2016-UC-0192 vaccine. Patient to a smoker, has	08/14/1965 M	014	Diabetes	027	Asthma	042	cigarettes	Not Complete																	
diabetes, and has asthma ar has received	nd																								
the Pneumococca																									
risk 1 dose 2016-UC-0193 series. Patient is 28	08/14/1965 M	014	Diabetes	027	Asthma	042	Smoke cigarettes	Not Complete	07/12/2016 PPSV 23	33	MSD	Valid	risk												
years of age, E MSM, has HIV Is an illicit dru	,																								
user, and has not been vaccinated wit					HIV/AIDS - not severely		Illicit																		
the Hep B 2016-UC-0194 vaccine.	03/23/1988 M	036	Men who have sex with men	155	immunoco mpromised	041	injection drug use	Not Complete																	
Patient is MSN has HIV, and is	ut, s																								
an illicit drug user, and has received the					HIV/AIDS -																				
first dose of th Hep B vaccine (Hep B Risk 3-			Men who have sex		not severely immunoco		Illicit																		
(Hep B NSK 3- 2016-UC-0195 dose series)	03/23/1988 M	036	with men	155	mpromised	041	drug use	Not Complete	05/19/2016 Hep B, Adult	43	MSD	Valid	risk												
Patient is MSN has HIV, is an																									
illicit drug use and has received the	r,				HIV/AIDS - not																				
second dose of the Hep B Risk			Men who have sex		severely Immunoco		Illicit injection								Нер В,										
2016-UC-0196 3-dose series Patient is MSh		036	with men	155	mpromised	041	drug use	Not Complete	05/19/2016 Hep B, Adult	43	MSD	Valid	risk	06/16/20	116 Adult 4	i3 MSE) Valid	risk							
has HIV, is an illicit drug use																									
and has received all three doses o	ıf				not severely		Illicit																		
the Hep B Risk 2016-UC-0197 3-dose series	03/23/1988 M	036	Men who have sex with men	155	immunoco mpromised	041	injection drug use	Complete	05/19/2016 Hep B, Adult	43	MSD	Valid	risk	06/16/20	Hep B, 016 Adult 4	3 MSE) Valid	risk	09	Hep B, /19/2016 Adult 4	3 MSD	Valid	Risk		
years of age, : microbiologist who is	a t				Travel to or																				
frequently exposed to					are residents																				
Neisseria meningitidis, and who plan	ıs				of countries in which																				
to travel to countries where			Microbiologists		meningoco ccal disease is																				
meningococca disease is			routinely exposed to Neisseria		hyperende mic or																				
2016-UC-0198 endemic. Patient is usin		050	meningitidis	164	epidemic			Not Complete																	
dialysis and ha had a previous severe allergio	5																								
reaction to vaccine ingredient			Severe allergic reaction after																						
yeast (Energix 2016-UC-0200 B) Patient is an	04/28/1949 M	097	previous dose of Hepatitis B	032	Dialysis patient			Contraindicated	05/17/2015 Hep B, Adult	43	SKB	Valid	risk												
animal handle who has had a	er 1																								
severe allergio reaction after previous dose			Severe allergic reaction after previous dose of		Animal				Rables - IM fibroblas	it															
2016-UC-0201 of Rables Patient is pregnant, and	03/21/1979 M	113	Rabies	061	handlers			Contraindicated	04/27/2016 culture	176	PMC	Valid	risk												
does not have evidence of																									
Immunity from Rubella 2016-UC-0202 disease.	n 06/01/1985 F	007	Pregnant					Contraindicated																	
2016-UC-0202 disease. 2016-UC-0203 relicit is seeking protection, an	M	116	Severe allergic reaction after	001	Patient seeks			Contraindicated	06/28/2016 meningococcal B, Of	MV 163		Valid	risk												
has had a severe allergio reaction after			previous dose of Meningococcal B		protection																				
previous dose of																									
	o1/13/1995 F	169	History of sexual					Complete	07/12/2015 9vHPV	165	Web	Valid	risk	01/23/2010	6 9vHPV 1	.65 Mr.r) Valid	risk							
Patient is 9 years of age, female, with a		-	abuse or assault					,						-,,,											
history of sexual assault and has																									
received two previous dose																									
of HPV vaccine at least 6 2017-UC-0001 months apart.																									

CDC_Test_ID	nder Obs	erva Observation_Te Observation_Dat Observati Observati Observation_D Observati Observati Observati Co xt_ e_1	i Series_Status	s Date_Admir stered_1	ii Vaccine_Name_1	CVX_1	MVX_1	1 Evaluation _Status_1	n Series_T ype_1	Evaluatio Date_Admin Vaccine_ n_Reason istered_2 Name_2	CVX_2	MVX_2	Evaluatio Series_Ty Evaluatio n_Status_ pe_2 n_Reaso	Date_Admin Vaccine_ CVX_3 n istered_3 Name_3	MVX_3	Evaluatio Series_Ty Evaluatio Date_Admin Vaccine_ CVX_4 n_Status_ pe_3
м	de_: 158	1 2 2 3 3 3	Not Complete							_1			2 _2			3 _3
Patient is 15 years of age, with a history interpretable of the patient of the interpretable of the patient of the interpretable of the patient of the received any previous doses of the IPPV		Immunosuppressi														
2017-UC-0002 vaccine. 10/01/2001 Patient is 15 Was a simulation of age, with a immunocuppre sake therapy and hax received the first dose of the HPV vaccine 3	158	ve therapy	Not Complete	01/08/2017	9vHPV	165	MSD	Valid	risk							
2017-UC-0001 does series 10/01/7001 M years of age, with a immunousppre save therapy and has received the second does of the 1 does MPV	158	Immunosuppressi ve therapy	Not Complete	01/08/2017	9vHPV	165	MSD	Valid	risk	02/05/2017 9VHPV	165	MSD	Valid risk			
2017-UC-00004 wacene series. 10/01/2/001 waren series. 10/01/2/001 waren series. 10/01/2/001 waren series. 10/01/2/001 waren series. 10/01/2/001 mmunorospore savee therapy, and has received all three. 10/01/2/01/2/01/2/01/2/01/2/01/2/01/2/0	158	Immunousppressi ve therapy	Complete	01/08/2017	9vHPV	165	MSD	Valid	risk	02/05/2017 9vHPV	165	MSD	Valid risk	06/08/2017 9·HPV 165	MSD	Valid Rok
HPV vaccine 2017-UC-000S series. 10/03/7001 year of age, with generalized malignant neoplans, and has not provious does of the left	156	Generalized mulginar enoplasm	Not Complete													
2017-UC-0007 vaccine. 06/02/7005 Fusion 11 years of age, with generalized multiparat neoplarm and has received has received the FV of ode 2017-UC-0008 vaccine series. 06/02/7005	156	Generalized muligrant energiaum		08/01/2016				Valid	risk							
to en er a stote 2017-UC-0000 er er a stote general net general net molignant nooplann and has received the second the second the second HTV section at 2017-UC-0000 4 weeks later - 06/(02/2005	156	Generalized multiplant neoplasm	Not Complete	08/01/2016	SVHPV	165	MSD	Valid	risk	08/29/2016 9vHPV	165	MSD	Valid risk			
Patient is 1.1 years of alexy generalized malignant nooplarm and has received all three doses of 2017-UC-COLD vaccine laries. 06/02/2005	156	Generalized muligrant neoplasm	Complete	08/01/2016	9vHPV	165	MSD	Valid	risk	08/29/2016 9vHPV	165	MSD	Valid risk	01/23/2017 9vHPV 165	MSD	Valle risk
ration in all adult with persistent complement complement complement and for a series of the complement and has not received any previous does of the Men B 2017-UC-COL1 vaccine 09/02/1995	151	Persistent compending properties properties properties factor & deforercy	Not Complete													
Patient is an M adult with persistent complement complement component deficiencies and his received the received the definition of the def	151	Persistent complement, properties de déficiency factor à déficiency factor à déficiency	Not Complete	03/02/2017	meningococcal B, OMN	/ 163	NOV	Valid	risk							
2017-UC-0012 vaccine 09/00/27995 years of age, a microbiologist controlling exposed to Messures exposed to Messures in the bit of the controlling 2017-UC-0016 for Mes ACVW 07/13/1977	050	Microbiologists routinely apposed to Messaria mering dida	Not Complete	07/13/2010	Meningococcal, MCV4	P 114	PMC	Valid	risk	07/13/2015 Meringood ccal, MCV4P	p 114	PMC	Valid risk			
2017-01-0216 for Men ALVW 07/14/1997 M 07/14/1997 M patient is 35 years of age and is traveling to a country that has active cholera 2017-UC-0015 transmission.	008	Travello san attac of act these new coloriar transmission	Not Complete													

CDC_Test_ID	Gender	tion_Co	xt_1 e_1	at Observati Observati Observation_ on_Code_ on_Text_ ate_2	on_Code_ on_Text_ on_Date_	i Series_Status	Date_Admir stered_1	ni Vaccine_Name_1	CVX_1	1 MVX_1	Evaluation _Status_1	1 ype_1	n_Reason istered_2	n Vaccine_ CVX_2 Name_2	MVX_2	Evaluatio Serie:	_Ty Evaluatio Date_Admir n_Reason istered_3	n Vaccine_ CVX_3 Name_3	MVX_3	Evaluatio Series_Ty Evaluatio Date_n_Status_ pe_3	Admin Vaccine_ CVX_4 d_4 Name_4
Patient is 35 years of age	М	de_1 008	Travel to an area of active cholera	2 2	3 3 3	Complete					Valid		_1			2	_2			.3	
and is traveling to a country that has active			transmission																		
cholera transmission																					
and has received the Cholera 1-dose																					
2017-UC-0016 series. 02/17/1: Patient is 28	982 M	119	Severe allergic reaction after	008 Travel to an area of		Contraindicates	d														
years of age and has a			previous dose of cholera	active cholera transmissio																	
severe allergic reaction after previous dose				n																	
of the Cholera 2017-UC-0017 vaccine. 08/01/1: years of age	989 M	151	Persistent			Complete	03/22/2018	meningococcal B,	162	PFR	Valid	risk	09/22/2018	meningoco 162	PFR	Valid risk					
with persistent complement and has			complement, properdin, or factor B deficiency					recombinant						ccal B, recombina nt							
received the second dose, of																					
the Risk 3 dose Men B vaccine series, at																					
greater than or equal to 6 months after																					
the first administered 2018-UC-0001 dose. 03/10/2	003																				
years has persistent	М	151	Persistent complement, properdin, or			Not Complete	10/02/2011	Meningococcal, MCV40	136	NOV	Valid	risk	01/02/2018	Meningoco 136 ccal, MCV4O	NOV	Valid risk					
complement and has received the			factor B deficiency																		
first dose of the MenACWY vaccine at 9																					
months, second dose at 2018-UC-0002 7 years. 01/02/2/ Patient is 21	011																				
years of age with Hepatitis C	F	005	Hepatitis C virus infection			Not Complete															
Infection and has not received a dose																					
of the Hep B 2018-UC-0004 vaccine. 06/23/1:	997 F	005	Hepatitis C virus			Not Complete	06/27/2018	HepB-CpG	189	DVX	Valid	risk									
Patient is 21 years of age with Hepatitis C			infection																		
Infection and has received																					
the first dose in the Risk 2 (Heplisav) dose																					
2018-UC-0005 Hep B vaccine. 06/23/1: Patient is 21	997 F	005	Hepatitis C virus Infection			Complete	06/27/2018	НерВ-СрБ	189	DVX	Valid	risk	07/25/2018	HepB-CpG 189	DVX	Valid risk					
years of age with Hepatitis C Infection and																					
has received the second dose in the Risk																					
2 dose Hep B 2018-UC-0006 vaccine. 06/23/19 years of age	997																				
and traveling to an endemic area during JE																					
Transmission, and has received the			Longer-term (e.g.,																		
two primary doses and the		165	1 month or more) travel to a JE- endemic area			Complete	04/28/201	Japanese Encephalit	is, 134	VAL	Valid	risk		Japanese Encephaliti 6 s, VC 134	VAL	Valid risk		Japanese Encephaliti 9 s, VC 134		/allid risk	
2019-UC-0001 booster dose. 09/10/1: Patient is 2 years of age with chronic	F F		Chronic renal failure			Not Complete	04/20/201	.0 VL	134	VAL	Valid	TER	03/23/201	0 3, VC 134	VAL	Valid 115K	07/19/2015	7 S, VC 134	VAL	Tax	
renal failure and no standard dose																					
2019-UC-0002 of PCV vaccine 04/29/2i Patient is 2 years of age	017 F		Chronic renal			Not Complete	07/01/2019	PCV 13	133		Valid	risk									
with chronic renal failure and has			failure																		
received the first dose of the PCV																					
2019-UC-0003 Vaccine. 04/29/20 Patient is 65 years with	017		Cochlear implants																		
Cochlear implants and no doses of																					
PCV 13 or 2019-UC-0008 PPSV23. 08/06/1: Patient is 65	954 M	011	Cochlear implants			Not Complete															
years with Cochlear implants with			The state of the s																		
PCV13 dose but 2019-UC-0009 no PPSV. 08/06/1: Patient is 65	954 M	011	Cochlear implants			Not Complete	08/06/201	9 PCV 13	133	PFR	Valid	risk									
years with Cochlear Implants and																					
has received PCV and PPSV 2019-UC-0010 dose 08/06/1: Patient is an	954 M	011				Complete	08/06/201	9 PCV 13	133	PFR	Valid	risk	08/06/202	0 PPSV 23 33	PFR	Valid risk					
adult with no history of the																					
Hep B vaccine and is seek 2019-UC-0011 protection. 08/15/1: Patient is an	971 F		Patient seeks protection			Not Complete						risk									
adult with the first dose of the																					
Hep B (Heplisav) 2019-UC-0012 vaccine. 08/15/1: Patient is an	971 F	001	Patient seeks protection			Not Complete	09/06/201	9 HepB-CpG	189	DVX	Valid	risk									
adult with two doses (Dose #1																					
is Heplisav vaccine) of the 2019-UC-0013 Hep B vaccine. 08/15/1:	971 F	001	Patient seeks protection			Not Complete	09/06/201	9 HepB-CpG	189	DVX	Valid	risk	10/04/201	9 Hep B 43		Valid risk					

me		Observation_Dat Observati Observation_D Observatio		Date_Admini Vaccine_Name_1 stered_1	CVX_1			s_T Evaluatio Date_Ac 1 n_Reason istered_ _1		CVX_2				Date_Admin Vaccine n istered_3 Name_3		MVX_3	Evaluatio Serie n_Status_ pe_3 3	s_Ty Evaluatio Date_Admin Vaccine_ CVX_4 n_Reason istered_4 Name_4 _3
Patient is an adult with																		
three doses of																		
the Hep B	Patient seeks																	
2019-UC-0014 vaccine. 08/15/1971 F	001 protection		Not Complete	09/06/2019 Hep B	189	DVX V	alid risk	10/04/	2019 Hep B	43	MSD	Valid ri	ik	11/01/2019 Hep B	43	MSD	Valid risk	
Patient is an																		
adult with four																		
doses (first and																		
fourth doses																		
are Heplisav) of																		
the Hep B	Patient seeks																	
2019-UC-0015 vaccine 08/15/1971 F	001 protection		Complete	09/06/2019 HepB-CpG	189	DVX V	alid risk	10/04/	2019 Hep B	43	MSD	Valid ri:	ik	11/01/2019 Hep B	43	MSD	Valid risk	11/29/2019 HepB-CpG 189

CDC_Test_ID MVX_4 Evaluatio Series_Ty Evaluatio Date_Ad Vaccine_ CVX_5 MVX_5 Evaluatio Series_Ty Evaluatio Date_Ac n_Status_pe_4 n_Reason initiatere Name_5	Admin Vaccine_ CVX_6 MVX_6 Evaluatio Series_Ty Evaluatio Date_Ad Vaccine_ CVX_7 MVX_7 Evaluatio Series_Ty Evaluatio Forecast_ Earliest_Date Recommende Past_Due_Da Administrative_Guidance 1,6 Name_6 n_Status_pe_5 n_Reason ministere Name_7 n_Status_pe_7 n_Reason # d_Date te 66 d_7	Vaccine_Group	Assessment_Date Evaluatio Date_added Date_updated Forecast_Reason_F Changed_ n_Tex_Ty pe
2015-UC-0012	2 06/75/2015 06/75/7015 07/72/7015	Var	test case Recomment title and Vaccine: delawid description 05/28/2015 0ff label 09/22/2017 12/09/2019 on interval No. Added recommend description
2016-UC-0002		DTaP	All Valle! ded: ** Forecast Contrainds: 01/01/2019 atten 4.0 12/10/2010 Test 01/01/2013 03/21/2019 atten 4.0 Added description
2016-UC-0003	2 04/80/2011 06/02/2011 07/79/7011	DTaP	All Valid: Recommen Forecat ded based 04/02/2011 Test 01/01/2013 GN/21/2019 on age 4.0 Not Added
2016-U-C-0004		DTaP	All Valid: recommend defection det (acception det (
2016-UC-0005		DTaP	All Valid: ded: Forecast contraindic 08/02/2010 Test 01/01/2013 03/21/2019 atton Added recommen description
2014-UC-0006		Flu	All Valld: ded: Forecast 01/01/2013 03/21/2019 attom 10/08/2014 Test 01/01/2013 03/21/2019 attom Not Added recommen description
2014 UC 0007		НерА	All Valid: ded: Forecast 01/04/2009 Test 01/01/2013 01/21/2019 and 4 0 Not Added recommen decription ded:
2036-UC-0008		НерВ	Forecast contrainds. 11/11/2006 Test 01/01/2013 03/21/2019 attion 4.0 Not Added recommen description All Valid: ded:
2016-UC-0009		НЬ	Forecast containdic 08/02/2010 Test 01/01/2013 09/21/2019 ation Not Added recommen description ded: All Valid: ded:
2016-U-0010		HPV	Forecast
2016-U-C011		Meningococcal	03/15/2011 Test 01/01/2013 03/21/2019 ation 4.0 Added Not description recommen
2016-UC-0012		MMR	All Vallet ded: Forecast contained: 09(02)7011 Test 01/01/2013 03/22/2039 atton Updated Not Observation 100to vision to 100to vision to
2016-0C-0013		MMR	Administer contralindic description 09/10/2011 ed 01/01/2013 03/22/2019 atton 4.0 Not recommen description recommend description
2036-UC 0014		Pneumococcal	All Valid: ded: Forecast O8/11/2007 Test O1/01/2013 O3/22/2019 alon Not Added recommen description ded: ded:
2016-UC-0015		POL	Forecast
2016-UC-0016		Rota	No Doses ded: Administer contraindic 03/14/2012 ed 01/01/2013 07/29/2019 atton Not Added recommen description
2036-UC-0017		Rota	All Valid: ded: Ontariandic Contraindic O4/01/2012 Test 01/01/2013 03/22/2019 ition 4.0 Not Added recommen description ded:
2016 UC 0018		Rota	An value: better Forecast 01/01/2013 03/22/2019 atton 4.0 Added Not description recommen
2016-U-C019		Var	Administer ded: ded: 04/01/2005 ed 01/01/2013 03/22/2019 Immune 4.0 Updated Updated Not assessment recommen date
3036-UC-0000		Var	Administer ded: ded:
2016-0-0031		Var	Forecast Contrainds 4.0
2016-UC-0022		Var	Al Valid ded. 154 also Forecast Contrained 127/07/010 Test 01/01/013 03/22/2019 aton Not. Not. Not. Output Not. Output
7016-UC-0023		Var	No Doses recommen ded definition of the control of
2016-UC-0034		Var	No Dose recommen ded decided decided of deci
2016-UC 0025		Var	Not asse No Doses recommen Administer 66el. 06/16/2004 ed 06/23/2015 07/29/2019 Immune 4.0

CDC_Test_ID MVX_4	VX_4 Evaluatio Series_Ty Evaluatio Date_Ad Vaccine_ CVX_5 MVX_5 Evaluatio Series_Ty Evaluatio Date_Admin Vaccine_ CVX_6 MVX_6 Evaluatio Date_Ad Vac. n_Status_pe_4 n_Reason ministere Name_5 n_Status_pe_5 n_Reason istered_6 Name_6 n_Status_pe_6 n_Reason ministere Name_8 n_Status_pe_6 n_Reason ministere Name_8 n_Status_pe_6 n_Reason ministere Name_8 n_Status_pe_6 n_Reason n_Status_pe_6 n_R	accine CWX.7 MVX.7 Evaluatio Series.Ty Evaluatio Forecast_Earliest_Date Recommende Past_Due_Da Administrative_Guidance ame_7	Vaccine_Group	Assessment_Date Evaluatio Date_added Date_updated Forecast_Reason_F Changed_ n_Test_Ty
2016-UC-0026			Var	Assessment date date No. Disses Not. recomment notation of the date Mol Disses Not. recomment notation of the notation of th
2016-UC-0027		2 06/75/2015 06/75/2015 07/72/2015	Var	All Valid: Recommen plat dus Forecast de de laved des de de laved de la configuration
2016-UC-0028			Var	All Valids Recommen Forecast Gelfaland 07/11/2012 Test 04/23/2015 07/29/2019 on interval Optioned specimen floot
2016-UC-0029			Var	No Doses recommend No Doses de Administer de CA (2015) (17/29/2019 aux partiel de CA
				us of the new product removes the text set of
2016-UC-0031		1 04/14/2005 04/14/2005	Zoster	06/18/2015 ed 06/23/2015 03/23/2019 Condition (4.1 added past their final condition) (4.1 added past their final condition) (4.2 added past their final condition) (4.2 added condition) (4.3 added co
				one dose of the AMARI vaccine that a second dose should be administer side second should be side side second sid
2016-UC-0032		2 05/78/2015 05/78/2015 05/77/2021	MMR	Al Valle: Recommend description Forecast: ded based : 04/30/2015 Text: 06/23/2015 12/85/2019 on interval Updated to digitally accurate forecasting date:
2016-UC-0033		1 04/01/1986 04/01/1986 04/28/1987	НерА	No Doses
2016-UC-0034		2 01/01/2017 01/01/2017	НерА	All Valid: Recommen Forecast 08/01/2016 03/23/2019 Condition 4.0 Added description
2016-UC-0035			НерА	All Valid: Recommen All Valid: Ged based 11/01/2016 Test: 08/01/2016 03/21/2019 Condition 4.0 Updated Ged Ged Ged Ged Ged Ged Ged Ged Ged G
2016-UC-0036		1 04/12/1962 04/12/1962 05/09/1963	НерА	No Dotes de Jacomeno data pad Administer de OR/01/2016 07/29/2019 Condo OR/01/2016 ed 08/01/2016 07/29/2019 Condo Administer de OR/01/2016 07/29/2019 Condo Adde description de OR/01/2016 07/29/2019 Condo Adde description
2016-UC-0037		2 G8/79/2016 G8/79/2016	НерА	All Valid: Recommen forecast 08/01/2016 Text: 08/01/2016 03/23/2019 Condition 4.0 1/2/2016 Text: 08/01/2016 03/23/2019 Condition 4.0 1/2/2016 Text: 08/01/2016 03/23/2019 Condition 6.66 1.664 1.664 1.664 1.665 1.
2016-UC-0038		3 10/01/2016 10/01/2016	Нер.А.	For doze For exat For example
2016-UC-0039			НерА	Recommen ded based Forecast on 02/64/2017 Test 08/01/2016 06/22/2019 Condition 4.0

CDC_Test_ID MVX_4 Evaluatio Series_Ty Evaluatio Date_Ad Vaccine_ CVX_5 MVX_5 Evaluatio Date_Admin Vaccine_ CVX_6 MVX_6 Evaluatio Series_Ty Evaluatio Date_Ad Vaccine_ CVX_7 MVX_7 Evaluatio Date_Admin Vaccine_ CVX_6 MVX_6 Evaluatio Series_Ty Evaluatio Date_Ad Vaccine_ CVX_7 MVX_7 Evaluatio Series_Ty Evaluatio n_Statuspe_4 n_Beason ministere Name_5 n_Statuspe_5 n_Reason intered_6 Name_6 n_Statuspe_6 n_Beason ministere Name_7 n_Statuspe_7 n_Reason 4 4 4 4 4 4 4 5 5 5 5 5 5 7 7 7 7 7 7 7	io Forecast_Earliest_Date Recommende Past_Due_Da Administrative_Guldance on # d_Date te	Vaccine_Group Assessme	mt_Date Evaluatio Date_added Date_updated Forecast_Reason_F Changed_ n_Test_Ty
2016-07-0040	1 01/12/2009 01/12/2009	НерВ (No Done Recommen Set Bussel Administra Administra OM/09/2016 07/29/2019 Condition OM/09/2016 07/29/2019 Condition OV. Code Updated CVC code Updated Upda
2036-UC-0042	3 06/07/2016 06/07/2016 06/15/2016	Hep8 (National Section National Se
2026-05-0049	4 08/17/2017 08/17/2017	Hepili (Interest includes the control of the
2016-UC-0044 5XB Valid risk 2016-UC-0045	1 01/17/1985 01/17/1985		All Valid: Recommen del based forecast
2016-UC-0046	2 05/20/2016 05/20/2016		AU/27/2016 ed 08/22/2016 07/29/2019 Condition date Added Georgation All Volid: Recummen All Volid: del Based forecast 08/22/2016 08/22/2016 Condition 4.0 Added Georgetion
2016-UC-0047	3 10/20/2016 10/20/2016	НерВ (All Yold: Recommen forecast 08/22/2016 08/22/2019 Condition Added description
2016-UC-0048		НерВ :	All Vollet Recommen
2016-UC-0049	1 02/11/1966 02/11/1966	НерВ (Recomment age for
2034-UC-0000	2 04/10/2016 04/10/2016	НерВ	Forecast on
2016-UC-0051	3 05/08/2016 05/08/2016	НерВ (All Valid: Recommen All Valid: Red based Forcast OR/74/2016 05/72/72019 Condition 4 0 Updated Gase to reflect accounts
2036-0C-0032	4 09/08/2016 09/08/2016	НерВ (Decimination
2016-UC-0053 5KB Valid risk		HepB (Recomment Updated Recomment Updated Recomment Updated Red based Recomment Updated Red based Recomment Updated Recommend Updated
2036-UC-0054	1 07/15/2015 07/15/2015	НЬ	No Doses Recommen ded based on 07/15/7015 ed 08/11/2016 07/28/7019 Condition 4.0

CDC_Test_ID MVX_4 Evaluatio Series_Ty Evaluatio Date_Ad Vaccine_CVX_5 MVX_5 Evaluatio Series_Ty Evaluatio Date_Admin Vaccine_CVX_6 MVX_6 Evaluatio Series_Ty Evaluatio Date_Admin Vaccine_CVX_7 MVX_7 Evaluatio Series_Ty Evaluatio Date_Admin Vaccine_CVX_6 MVX_6 Evaluatio Series_Ty Evaluatio Date_Admin Vaccine_CVX_7 MVX_7 Evaluatio Date_Admin Vaccine_CVX_6 MVX_6 Evaluatio Series_Ty Evaluatio Date_Admin Vaccine_CVX_7 MVX_7 Evaluatio Date_Admin Vaccine_CVX_6 MVX_6 Evaluatio Series_Ty Evaluatio Date_Admin Vaccine_CVX_6 MVX_6 Evaluatio Date_Admin Vaccine	stio Forecast_Earliest_Date Recommende Past_Due_Da Administrative_Guldance d_Date te	Vaccine_Group Assessment_Date Evaluatio Date_added Date_updated Forecast_Reason.F. Changed_n_Test_Type_or_Chang_ in_Versio_pe_n_Added pe_n_Added_decorption_updated_assessment_date Added_decorption_updated_assessment_date_added_decorption_updated_assessment_date_added_decorption_date_date_date_date_date_date_date_date
2016 UC-0005	2 10/10/2016 10/10/2016	All Valid. Recammen del bland Forecat Hib 08/15/2016 Test 08/11/2016 07/29/2019 Condition Added decryption
3036 MC-0056		All Valid: Recommen ded based on Hib 10/03/2015 Text 08/11/2016 01/03/2015 Condition 4.0 Added Georgeton ; splated assument date date date date date.
2016 UC-0057	2 OBJO/2005 OBJO/2005	All Volid: Recommen forecast Hib 01/10/2015 Test 08/25/2016 07/29/2019 Condition Updated to display SECURIARY SECURIARY Gate based on ALP recommen diston. description
2016-UC-0058	3 06,08/2016 06,08/2016	All Volid. Recommen All Volid. See Based Forecast On Hib 04/13/2016 Test: 08/25/2016 05/04/2019 Condition Added decorption
2016-UC-0059		All Volid: Recommen
2016-UC-0060	3 09/02/2013 09/02/2013	recommen Ricommen All Valid: Recommen All Valid: Ged based Forecast on Hib 07/08/2013 Test 08/11/2016 01/07/2019 Condition 4.0 Added description
2016-UC-0061	Vaccination 14 or more days before splenectory is suggested.	All Volid: Recommen. All Volid: Sed based on Forecast OB/11/2016 04/25/2019 Condition Updated specified of the Condition Object of Sed based on Childhood of Condition Object of Sed based on Childhood of Childhood
3016-MC-0062	1 09/22/2010 09/22/2010 Vaccination 14 or more days before splenectory is suggested.	elective spinenctom Recomment y and Mo Doses Administer Hb 07/01/2016 ed 08/15/2016 12/02/2019 Condeton . 4.1
2016-UC-0069	. Vaccination 14 or more days before splenectory is suggested.	Earliest and Recommen ded date to
2016 UC-0064	1 10/10/1998 10/10/1998	

CDC_Test_ID MVX_4 Evaluatio Series_Ty Evaluatio Date_Add Vaccine_CVX_5 MVX_5 Evaluatio Series_Ty Evaluatio Date_Addmin.Vaccine_CVX_6 MVX_6 Evaluatio Series_Ty Evaluatio Date_Add Vaccine_CVX_7 MVX_7 Evaluatio Series_Ty Evaluatio Form. 1. Satus_p e.4 n. Reason ministere Name_5 n. Satus_p e.5 n. Reason is latered_6. Name_6 n. Satus_p e.6 n. Reason ministere Name_7 n. Satus_p e.7 n. Reason # 1. Satus_p e.4 n. Reason ministere Name_7 n. Satus_p e.7 n. Reason # 1. Satus_p e.4 n. Reason ministere Name_7 n. Satus_p e.7 n. Reason # 1. Satus_p e.4 n. Reason ministere Name_7 n. Satus_p e.7 n. Reason # 1. Satus_p e.4 n. Reason ministere Name_7 n. Satus_p e.7 n. Reason # 1. Satus_p e.4 n. Reason ministere Name_7 n. Satus_p e.7 n. Reason # 1. Satus_p e.4 n. Reason ministere Name_7 n. Satus_p e.7 n. Reason # 1. Satus_p e.4 n. Reason ministere Name_7 n. Satus_p e.7 n. Reason # 1. Satus_p e.4 n. Reason ministere Name_7 n. Satus_p e.7 n. Reason # 1. Satus_p e.4 n. Reason ministere Name_7 n. Satus_p e.7 n. Reason # 1. Satus_p e.4 n. Reason ministere Name_7 n. Satus_p e.7 n. Reason # 1. Satus_p e.4 n. Reason ministere Name_7 n. Satus_p e.7 n. Reason # 1. Satus_p e.4 n. Reason ministere Name_7 n. Satus_p e.7 n. Reason # 1. Satus_p e.7 n. Reason ministere Name_7 n. Satus_p e.7 n. Reason # 1. Satus_p e.7 n. Reason ministere Name_7 n. Satus_p e.7 n. Reason ministere Name_7 n. Satus_p e.7 n. Reason ministere Name_7 n. Reason ministere Nam	recast_ Earliest_Date Recommende Past_Due_ d_Date te	Vaccination 14 or more days before	Vaccine_Group	Assessment_Date Evaluatio n_Test_Ty pe	Date_added Date_updated Forecas Test_Ti	ype or_Chang In_Versio e n Added
		splenectomy is suggested.				description
					Recomm	nen
				All Valid: Forecast	ded bas	ed
2018-UC 0065			НЬ	08/03/2016 Test	08/15/2016 01/08/2019 Condition	Added
					Recomm	description
				No Doses Administer	ded bas	ed
2018-UC-0066	1 07/23/2004 07/23/2004		НЬ	02/03/2016 ed	08/23/2016 01/08/2019 Condition	Added
					Recomm	description
				No Doses Administer	ded bas	ed
2016-01-0007		At least 4 weeks should separate doses, 6	Hib	02/03/2016 ed	08/23/2016 01/08/2019 Condition	Added
		to 12 months after a successful transplant				description
				No Doses	Recomm ded bas	
2016-UC 0068	1 09/25/2010 09/25/2010	At least 4 weeks should separate doses, 6	нь	Administer 09/19/2014 ed	on 08/15/2016 01/08/2019 Condition	on 4.0 Added
		to 12 months after a successful transplant				description
				All Valid:	Recomm ded bas	nen ed
2016-UC-0069	2 10/17/2014 10/17/2014		нь	Forecast 09/19/2014 Test	on 08/15/2016 01/08/2019 Condition	on 4.0
		At least 4 weeks should separate doses, 6 to 12 months after a successful transplant				Added description
				All Valid:	Recomm ded bas	nen ed
2016-UC-0070	3 11/14/2014 11/14/2014	At least 4 weeks should separate doses. 6	нь	Forecast 10/17/2014 Test	08/15/2016 01/08/2019 Condition	on 4.0 Added
		to 12 months after a successful transplant				description
				All Valid:	Recomm	
2016-0-C0071			нь	All Valid: Forecast 07/27/2014 Test	ded bas on 08/15/2016 01/08/2019 Conditio	
		At least 4 weeks should separate doses, 6 to 12 months after a successful transplant				Added Vaccine
						Group, Description
						s, and forecast date
				No Doses Administer	Recomm ded bas on	
2016-0-00072	1 06/24/1996 06/24/1996	At least 4 weeks should separate doses, 6	Hb	07/27/2016 ed	08/22/2016 01/09/2019 Condition	on 4.0 Added
		to 12 months after a successful transplant				description
					Recomm	nen
				All Valid: Forecast	ded bas on	
2016 UC 02073	2 08/22/2016 08/22/2016	At least 4 weeks should separate doses, 6 to 12 months after a successful transplant	НЬ	07/25/2016 Test	08/22/2016 01/09/2019 Condition	on 4.0 Added description
		to 12 montrs after a successful transplant				uescription
				All Valid:	Recomm ded bas	
2016-UC 0074	3 09/19/2016 09/19/2016		Hb	Forecast 08/22/2016 Test	on 08/25/2016 01/09/2019 Condition	on 4.0
		At least 4 weeks should separate doses, 6 to 12 months after a successful transplant				Added description
					Recomm	
				All Valid: Forecast	Recomm ded bas on	
2016-UC 0075			НЬ	09/19/2016 Test	08/25/2016 01/09/2019 Condition	added Past
						Due date, and description
					Recomm	nen
				No Doses Administer 01/09/2017 ed	ded base on 08/15/2016 05/22/2019 Condition	ed
2016 UC 0076	1 04/04/2016 04/04/2016 04/03/2	018	HPV	01/09/2017 ed	U8/15/2016 05/22/2019 Condition	added
						description
				All Valid:	Recomm ded bas	nen ed
2016 UC-0077	2 05/15/2017 06/15/2017 02/11/2	018	HPV	Forecast 12/15/2016 Test	on 08/15/2016 05/22/2019 Condition	on 4.0
						added description
					Not Recomm	nen
				All Valid: Forecast 01/05/2017 Test	ded: Patient	
2016-UC-0078			HPV	01/05/2017 Test	08/16/2016 05/04/2019 Complet	te 4.0

CDC_Test_ID MVX_4 Evaluatio Series_Ty Evaluatio Date_Ad Vaccine_CVX_5 MVX_5 Evaluatio Date_Admin Vaccine_CVX_6 MVX_6 Evaluatio Series_Ty Evaluatio Date_Admin Vaccine_CVX_7 MVX_7 Evaluatio Date_Admin Vaccine_CVX_6 MVX_6 Evaluatio Series_Ty Evaluatio Date_Admin Vaccine_CVX_7 MVX_7 Evaluatio Date_Admin Vaccine_CVX_6 MVX_6 Evaluatio Series_Ty Evaluatio Date_Admin Vaccine_CVX_6 MVX_7 Evaluatio Series_Ty Evaluatio Date_Admin Vaccine_CVX_6 MVX_6 Evaluatio Series_Ty Evaluatio Date_Admin Vaccine_CVX_6 MVX_7 Evaluatio Date_Admin Vaccine_CVX_6 MVX_6 Evaluatio Series_Ty Evaluatio Date_Admin Vaccine_CVX_6 MVX_7 Evaluatio Date_Admin Vaccine_CVX_6 MVX_6 Evaluatio Date_Admin Vaccine_CVX_6 MVX_7 Evaluatio Date_Admin Vaccine_CVX_6 MVX_6 Evaluatio Date_Admin Vaccine_CVX_6 MVX_7 Evaluatio Date_Admin Vaccine_CVX_6 MVX_6 Evaluatio	cast_Earliest_Date Recommende Post_Due_Da Administrative_Guidance Vaccine_Group Assessment_Date Evaluatio Date_added Dat d_Date te	te_updated Forecast_Reason_F Changed_ Test_Type or_Chang In_Versio e n New New 2 Per 2 per 2 per 2 per 2 per 2 per 3 per 3 per 3 per 4 per
2016-UC-0079	All Valid: Forecast - NPV 06/01/2017 Test 06/16/2016	Recommen ded based on 01/09/2019 Condition 4.0 added description
2016-UC-0080	No Doces: Administer 1 02/15/2016 02/15/2016 02/14/2018 HPV 11/17/2016 ed 08/16/2016	Recommen ded based on 66/12/2019 Condition 4.0 Update test case with observatio nal code 14.8, Added
2016-UC-0083	All Volid: Forecast - HPY 11/01/2016 Test: 08/17/2018	description Recomment ded based of on 01/09/2019 Condition 4.0 added description
2016-UC-0084	All Valid: Forecast 3 09/21/2016 10/21/2016 06/17/2017 HPV 05/19/2016 Test 08/17/2016	Recommen ded based 05/64/2019 Condition Updated Earliest, Recommen ded, and
2016-UC-008S	All Valid: Forecast 1 03/02/2003 03/02/2005 03/01/2007 HeV 02/02/2016 Test 08/117/2016	Recommend ded based on 01/09/2019 Condition Updated Earliest, Recommen
2016-UC-0085	All Valid: Forecast 2 08/18/2016 08/18/2016 11/09/2016 HPV 07/21/2016 Test 08/17/2016	Recommen ded, Past due date, and added on 12/09/2019 Condition Updated Earliest, Recommen ded, and past due
2016-UC-0087	All Valid: Forecast 3 09/03/2014 13/03/2014 11/10/2014 HPV 03/03/2014 10/03/2014 10/03/2014	date based on IPFV Recommen Recommen detaine, det based added on 01/09/2019 Condition Added description Added
2016-UC-0089	ACIP recommends that if the primary series of LFV CVs as administered great may be series of LFV CVs as administered great may be given before potential E Vivia exposure. ACIP commendations should be consultated for information on prevention of LF and settings in which II. considered, or in not recommended. Data on the response to a Deboter done and the consultate on the response to ACIP consultate. considered, or in not recommended. Data on the response to a Deboter done administered greater than 2 years after the growth and the consultate. considered for the CVF or end available. This includes long-time traveler a 21. month, recovered travelers, or expanitions who will be based in urban areas that are falled by twice the consultate of the Vivia and the CVF or exposure that are falled by twice the consultate of the Vivia and the CVF or exposure that are falled by twice the CVF or exposure that are falled by twice the CVF or exposure that the CVF or exposure that the CVF or exposure the Vivia provided of Vivia and the CVF or exposure the Vivia provided of Vivia and the CVF or exposure the Vivia provided of Vivia and the CVF or exposure the Vivia for	Recommen ded based on 01/09/2015 Condition Added description Biscommen ded based of 05/64/2013 Condition Updated enlies enlies 10 7 days.
2016-UC-6090	premention of it and settings in which IE vaccine is recommended, can be considered, or it not recommended totals considered, or it not recommended totals administered grinared than 2 years after the primary series of IE-VC are not a variable. Data on the near for and mining of additional become done and mining of additional become dones also are not available. This includes long-term travelers a 21 month, recomment travelers, or expatitutes who will be based in urban versus but are areas during a higher about a fair traveler and areas during a higher traveler and areas during a higher species of IE travel trammension. If vaccine should be considered for not here registes than 1 month) travelers whose these any or activities may be increase their and for recommended for a host term travelers whose using the recent there are set.	Modeled Addied A

CDC_Test_ID MVX_4 Evaluation Series_TVy Evaluation Date_Add Vaccine_ CVX_5 MVX_5 Evaluation Series_TVy Evaluat	Series II y haustaid late, Ad Vaccine, CVL, 7 MVL, 1 Evaluation Series II Evaluation Federat, Earnest Juste De 6 n. Reacon ministres Name, 7 n. Status, pe. 7 n. Reason 8 n. Reacon 8 n. R	Recommende Past Due_ d_Date te	Dis Administratorie, Guidance ACIP recommends that if the primary series of if I/V was administered greater than 1 year previously, a booster does may be given being prevential of vision be consulted for information on be consulted for information or be consulted for information or be consulted for information or on the response to abooster does administered greater than 2 years after the primary series of if I/V zer not available, table on the need for and timing of available.	,	Assessment_Date Evaluatio onTest_Ty pe	Jate_added Dal	ste_updated Forecast_ Reso, Test_Type or_Ch = Added decry stated new MMW suby 20 recom dation boonte dove.
2016-UC-0091	3 05/75/201	7 05/25/2017	This includes long term travelers at mostly, recurrent travelers or equivalent mostly, recurrent travelers or equivalent mostly recurrent travelers or equivalent lakely to test endemier could or agricultural areas diverge a high-risk period of if vivus traventessions. If success should be considered for short term (see that a 1 activities might increase their cities for exposure to III vivus. If vaccines insoft recommended for whost term travelers whose vivus will be restricted to urban areas.		All Valid: Forecast 07/10/2019 Test	08/23/2016	Bocommen ded based on 07/19/2019 Condition added decrit
2016-14-0002	1 08/28/201	5 08/28/2016 02/27/2:	Children who received MMR vaccine before age 12 months should be considered potentially susceptible to all three diseases and should be revaccinated with 2 doses of MMR vaccine, the first dose administered when the child is aged 12 through 15 months (12 months if the child remains in an area where disease risk		No Doses Administer 08/28/2016 ed	08/28/2016	Recommen ded based on 04/25/2019 Condition added descri
2016-0-0003	2 02/38/201	7 02/28/2017 07/25/2:	is high) and the second dose at least 28 days later.	MMR	All Valid: Forecast 08/28/2016 Test	08/18/2016	Recommen ded based on 04/25/2019 Condition added descrij
2016-UC-0094	3 12/12/201	5 12/12/2016		MMR	All Valid: Forecast 06/12/2016 Test	08/18/2016	Recommen ded based on 03/28/2019 Condition Upda title descr of tee case.
.2016-UC-0095	4 07/10/201	5 07/10/2016		MMR	All Valid: Forecast 12/12/2016 Test:	08/18/2016	Recommen ded based on 10/16/2019 Condition Upda title decreased of the case.
2016-UC-0096-MSD Valid risk				MMR	All Valid: Forecast 01/12/2017 Test No Doses Administer	08/18/2016	Recommen ded based on 10/30/2019 Condition adde decrif decrif for the commen ded based on the commen ded based
2016-U-0097	1 07/84/200 2 08/81/201			MenB MenB	Administer 07/04/2016 ed All Valid: Forecast 07/04/2016 Test		04/25/2019 Condition added description des
2016-U-C-0099				MenB	All Valid: 01/04/2017 Test	01/04/2017	Recommen ded based on 03/07/2019 Condition

n_Status_pe_4 in_Resson ministere Name_5 in_Status_pe_5 in_Resson it 4 _ 4 d_5 _ 5 _ 5	uste, Admini Vaccine CVX_6 MVX_6 Evaluatio Series Ty Evaluatio Date, Ad Vaccine CVX_7 MVX_7 Evaluatio Series Ty Evaluatio Date, Ad Vaccine CVX_7 MVX_7 Evaluatio Series Terred_6 Name_6 n_6 Status_pe_6 n_8eason ministere Name_7 n_Status_f	pe_7 n_Besson # d_Date te 	Vaccine_Group	n_Test_Ty Test_Type or_Chang in_Versio pe Added Added description
2016-UC-0100		1 03/73/2016 03/73/2016	MenB	No Dotes Recommen Administrat on G1/28/2016 of 01/20/2019 Cendition 4.0 Administrat on Administration Administr
2016-U-C0101		2 04/25/2016 04/25/2016	Men8	All Valid: Recommen All Valid: Get based Forecast 03/28/2016 Test 08/30/2016 01/10/2012 Condition 4.0 Added description Recommen
2016-U-C4103		1 10/01/1986 10/01/1986	MenB	No Doses des based Administrat on O6/23/2016 ed 09/07/2016 01/10/2019 Condition 4.0 Added past due date.
2016-0-0.004		3 07/21/2016 07/21/2016 0M/17/2016	Menß	Updated based on charge in 4 vested on charge in 14 vested on charge in 14 vested on charge in 15 vested on the charge in 16 vested on the charge in 16 vested on the charge in 16 vested on 16 vested on the charge in 16 vested on the char
2016-0C-0105		3 12/23/2016 12/23/2016 If Meta/CNY D Is seed, it shall demonstrated at local 4 and completion of all PCV does.	MenB old be after	added All Valid: Recommen deformation Forecast on 07/21/2016 Test 09/07/2016 12/02/2019 Condition 4.1 Added description
2016-UC-0107		1 04/14/2015 04/14/2015 If MenACWY-D is used, it she administred at least 4 week completion of all PCV doses.	Meningococcal ald be after	No Doses Recommen ded based Administer on 04/14/2015 ed 09/07/2016 01/10/2019 Condition 4.0 Added description
2016 UC 0108		2 06/09/2015 06/09/2015 If Men-ACWY-D Is used, it is administered at least 4 week completion of all PCV does.	Meningococcal ald be after	All Valid: Recommen All Valid: der buxed on Porcest on 04/14/2015 Text 05/07/2016 01/11/2019 Condition 4.0 Added description
2016-0-0109		3 OR/04/2015 OR/04/2015 If MenACWY-D Is used, if and administered at legal 4 weeks completion of all PCV doses.	Meningococcal ild be after	All Valid: Recommen All Valid: ded based Forecast on 06/09/2015 Test 09/07/2016 01/14/2019 Condition Added description
.2016-UC-0110		4 02/04/2016 02/04/2016 If MenACWY-D Is used, it also administred at least 4 week completion of all PCV dose.	Meningococcal ald be after	All Valid: Recommen All Valid: ded based Forecast on 08/04/2015 Test: 09/08/2016 01/14/2019 Condition 4.0 Added description
2016-UC-0111 NOV Valid risk		5 02/14/2019 02/14/2019 If MenACWY-0 Is used, if she administered at least 4 week completion of all PCV does.		All Valid: Recommen All Valid: ded based Forecast: 09/09/2016 01/14/2019 Condition 4.0 02/14/2016 Test: 09/09/2016 01/14/2019 Condition Added description
Meningoco ccal, 2016-UC-0113 NOV Valid risk sessesses MCV4O 136 NOV Valid risk		6 08/23/2021 08/23/2021 If Mend-CNY. D is send, it shis administered at least 4 werk completion of all PCV doces.	after	All Valid: Recommon All Valid: ded based Forecast on 4.0 08/23/2016 Test 09/08/2016 01/14/2019 Condition 4.0 Description
Meningoco ccil,	Meningozo czi,			All Valid: Recommen All Valid: ded based

CDC_Test_ID MVX_4 Evaluatio Series_Ty Evaluatio Date_Ad Vaccine_ CVX_5 MVX_5 Evaluatio Series_Ty Evaluatio Date_Admin Vaccine_ CVX_6 n_Status_pe_5 n_Reason intered_6 Name_6 4 4 4 4 5.5 5 5 5 5 5 5 5 5 5 5 5 5 5 5	MVX_6 Evaluatio Series_Ty Evaluatio Date_Ad Vaccine_CVX_7 MVX_7 Evaluatio Series_Ty Evaluatio For n_Status_pe_6 n_Reason ministere Name_7 n_Status_pe_7 n_Reason #	orecast_ Earliest_Date Recommende Past_Due_Da Administrative_ d_Date te	Guidance Vaccine_Group	n_Test_Ty	Date_updated Forecast_ Reason_F Changed_ Test_Type or_Chang In_Versio
4 _4 0_3 3 _3	° ° ° ' ' ' ' ' ' ' ' ' ' ' ' ' ' ' ' '	If MenACWY-D is	used, it should be east 4 weeks after	ре	e n Added Description
2016-UC-0114		1 12/10/2015 12/10/2015 If MenACMY-0 Is administered at 1 completion of all	east 4 weeks after	No Doues Administer 12/10/2015 ed 09/08/201	Basamman deel based of 01/14/2019 Condition 4.0 Added description
2016-UC-0115		2 03/03/2016 03/03/2016 If MetACWY-D is administered at the completion of all	east 4 weeks after	All Valid. Forecast 12/10/2015 Test 08/09/201	Recommen del based 6 01/14/2019 Condition 4.0 added description
2016-UC-0116		3 05/10/2019 05/10/2019 If MenACMY-0 Is administrated at a completion of all	east 4 weeks after	All Valid: Forecast 0%/10/2016 Test 08/09/201	Updated Assessmen t Date. Added description
2016-UC-0117		1 09/28/2015 09/28/2015 If MenACWV-0 is administered at a completion of all	east 4 weeks after	No Doses Administer 09/30/2015 ed 09/09/201	ded based on
2016-UC-0123		1 04/18/1994 04/18/1994 If MenACW.* 0 is administered at lacompletion of all	east 4 weeks after	All Valid: Forecast 05/02/2016 Test 09/09/201	Recommen ded based 6 03/15/2019 Condition 4.0 added description
2016-UC-0124		2 06/27/2016 06/27/2016 07/24/2016 If MenACWY-0 is administered at a completion of all	east 4 weeks after	All Valid: Forecast 05/02/2016 Test 09/09/201	Recommen ded based on 6 03/07/2019 Condition Added description
2016-UC-0125		3 06/27/2021 06/27/2021	Meningococcal	All Valid: Forecast 06/27/2016 Test 08/08/201	Recommen ded based on 6 03/07/2019 Condition 4.0 added description
2016-UC-01.27		for use in person	Meningococcal accines that are licensed aged 256 year are not ei in the United States	All Valid: Forecast 01/17/2016 Test 08/30/201	Recommen de based on 6 03/67/2019 Condition 4.0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0
2016-UC-0128		recommended in because they are meningococci of India use in person currently with the meningococci or meningo	eningococcal vaccination at increased risk for sease should receive gate vaccine Meningococcal accines that are licensed aged 356 year are not e in the United States	No Doses Administer 08/30/2016 ed 08/30/201	Becommen de based on on of CR/22/2019 Condition 4.0 added decription
2016-UC-0129		meningococcal d MenACWY conjug 2 05/23/2021 05/23/2021 Administer durin (preferably durin	enlingococcal vaccination at increased risk for sease should receive gate vaccine Meningococcal g each pregnancy g 27 to 36 weeks' ess of interval since prior		Recommen ded based on 60 13/72/2019 Condition added description Recommen
2016-UC-0130 2016-UC-0131		1 02/27/2016 05/03/2017 Administer durin (preferably durin gestation (preferably durin Td or 1dap vaccer .	g 27 to 36 weeks' less of interval since prior	No Doses Administer 08/22/2016 ed 08/23/201 All Valid: Forecast 03/01/2017 Test 08/23/201	ded based
				All Valid:	and Updated Updated past due date Recommen ded based
2016-UC-0132 PMC Valid standard		5 11/23/1995 11/23/1995 11/23/1995	IPOL	Forecast 04/04/2016 Test 08/19/201	on 6 01/15/2019 Condition 4.0

CDC_Test_ID MXX_4 Evaluatio Series_Ty Evaluatio Date_Ad Vaccine_ CXX_5 MXX_5 Evaluatio Series_Ty Evaluatio Date_Admin Vaccine_ CXX_6 MXX_6 Evaluatio Series_Ty Evaluatio Date_Ad Vaccine_ CXX_7 n_Status pe_4 n_Reason iministere Name_5 n_Status pe_5 n_Reason intered_6 Name_6 n_Status pe_6 n_Reason iministere Name_7 4 d_5 5 5 5 6 6 d_7	Updated text class description description
2016-UC-0133 PMC Valid standard messesses IPV 10 PMC Valid standard	and first doine alministrate and first office alministrate and first office alministrate and first office an
7036 UC 0334	No Doors Recommen ded based 1 08/10/1579 08/10/1579 IPOL 09/05/2016 ed 09/05/2016 01/15/2019 Condition 4.0 Addient star Due date, added description
2016 U-C-0.135	All Valida Recommens All Valida Gels based Parciant Gels based 2 10/03/2016 10/03/2016 10/36/2016 10/36/2016 PPOL 09/05/2016 Test 08/19/2016 01/15/2019 Condenson 4.0 Added Park Bootsplan Scorpton
2016-UC-0136	All Value Recommen All Value Gerbard Forecast Forecast 04/18/2017 10/02/2017 IPOL 10/03/2016 Test 04/18/2016 01/15/2019 Condition 4.0 Added decryption
2016-UC-0117	All Valids declared Porcast Porcast O4/02/2017 feet 08/15/2016 03/15/2019 Condition All Valids declared Forecast O4/02/2017 feet 08/15/2016 03/15/2019 Condition All Valids All Valids Forecast O4/02/2017 feet 08/15/2016 03/15/2019 Condition All Valids All Valids O4/02/2017 feet 08/15/2016 03/15/2019 Condition All Valids All Valids O4/02/2017 feet 08/15/2016 03/15/2019 Condition All Valids O4/02/2017 feet 08/15/2016 03/15/2019 Condition All Valids O4/02/2017 feet 08/15/2019 Condition All Valids O4/02/2017 feet 08/15/2016 03/15/2019 Condition All Valids O4/02/2017 feet 08/15/2019 Condition O4/02/2017 feet 08/15/2019 Condition All Valids O4/02/2017 feet 08/15/2019 Condition All Valids O4/02/2017 feet 08/15/2019 Condition O4/02/2017 feet 08/15/2019 Conditio
2016 UC-0138	Setum disclosing by gape more script focus whiches next in the common should only be given 4 01/5/2016 01/15/2016 The 6 month booter should only be given show a serious margine has been settled for the set of the common should only be given should only be given should not be given the set of the set of the common should only be given should not be given the set of the set of the common should only be given to the set of the
2016-UC-0139 NOV Valid risk	Al Valid Becommen Al Valid Ged based Forecast on 5 07/19/2016 07/19/2016 Ptet 01/29/2016 Ftet 01/26/2016 01/16/2016 Updated forecast
2016-UC-0140	Degin age Faccomment of 15 Gr Recomment of 15 Gr Recommend of 15 Gr Recomment of 15 Gr Recommend of 15
2016-UC-0141	All Voilet Recursions All Voilet Sections 2 05/23/2016 05/23/2016 55/23/2016 Rables 05/25/2016 Feet 08/26/2016 01/16/2019 Confidence 4.0 Part to the section of the sectio
7036-0C-0142	All Valid Recomment
2016-UC-0143	
2015-UC-0144	Rest. Collegate: Head Inflation in a 2 1 3 Recommen from All Viside yang His Generacent Rocus All Viside ded based leh Balleon text. Forecast 4 07/89/2017 07/89/2017 Hables 07/89/2015 Fest 08/29/2016 01/16/2019 Condition 4.0

CDC_Test_ID MVX_4 Evaluatio Series Ty Evaluatio Date_Ad Vaccine_CVX_5 MVX_6 Evaluatio Series.Ty Evaluatio Date_Admin Vaccine_CVX_6 MVX_6 Evaluatio Series.Ty Evaluatio Date_Admin Vaccine_CVX_6 MVX_6 Evaluations in Status_pe_5 n. Reason intered_6 Name_6 n. Reason intered_6 n. Reason intered_	tous_pe_6 in_Reason ministeren Name_7 in_Status_pe_7 in_Reason # d_Date te
2016-UC 0145 PMC Valid risk	All Valid: Recomming All Valid: deel bases ferecast o 5 07/18/2019 07/18/2019 Rables 07/19/2017 Test: 08/29/2016 03/07/2019 Condition
2036-UC-0246	Recommer No Doses Recommer No Doses ded base ded base Administer on Administer on O4/19/1972 Tips vaccine should be given at least 2 Typhoid O7/22/2016 ed O4/19/2015 O3/07/2015 Condition Value to bring potential exposure. Primary vaccination with live attenuated
2016-UC0147	7/21 avectine consists of one enters. coated copatio Ealth on a letter mate days (play, 0, 4, and 6), for a total of four capacities. The capacities must be letter as the capacities. 2 07/22/2018 07/22/2018 to 17/22/2018 data 1 sizes. Thyphod 07/22/2018 Test 08/18/2016 Condition This variance should be given at least 2 weets before potential exposure.
2016-UC-0146	Primary sectrations with live attenuated 1/21 are section consist of one enterior. coasted capacite table no nathernate days (stoys, 1, 4, and (s), file a related force (stoys), 4, and (s), file a r
. 2016-UC 0149	Primary sectionation with live attenuated 1/21 are sense reconstructed one enteric- 1/21 are sense reconstructed one enteric- 1/21 are sense reconstructed one enteric- 1/21 are sense reconstructed from the sense sense recon
2016-0-0 0130	Primary securations with live attenuated 1/21 as vecine consists of one enterior. coated capacite latent on alternate days (sky o. J. 4, and l., for a varied of four capacites. The capacited must be kept entirepressed from thomasili. Such capacite and the securation of the capacites. The capacited must be kept entirepressed from thomasili. Such capacite and the securation of the capacites of the capacites. The capacite must be kept entirepressed from thomasili. Such capacite entirepressed from thomasili. Such capacite entirepressed from thomasili. approximate than \$8.0 \tau 0.0 \t
7016-UC-0151	Women who were suggested regardines of stronger place the process of white fever vaccine should receive a deal of white fever vaccine should receive a deal of white fever vaccine should receive a deal of the vaccine and who are sufficiently immunicompetent to be safely vaccinised to be safely watconsisted be watched by multiple of the vaccinised of a few should be revicined as the safely and the vaccinised of a few should be revicined as the safely vaccinised should receive a done every. A bound on season, location, activities, and duration of their travel. Persons who were infected with let y when they reviewed their last add one of yellow fever vaccine should receive a done every. No Dose deal vaccinism and the safely of the vaccinism of the safely vaccinism to a decident some of yellow fever vaccine should done of yellow fever vaccine and sadqualed for certain travelers but additional done of yellow fever vaccine and received as the safely value of their vaccine and received as the safely value of their vaccine and received as the safely value of their vaccine and received as the safely value of their vaccine and received as the safely value of their vaccine and received as the safely value of their vaccine and received as the safely value of their vaccine and received as the safely value of their vaccine and received as the safely value of their vaccine and received as the safely value of their vaccine and who are
2016-0-C-0133	sufficiently immunocompetent to be safely vaccinated. A booted rise may be given to traveler. A booted rise may be given to traveler. When the control of

	Admin Vaccine_ CVX_6 MVX_6 Evaluatio Series_Ty Evaluatio Date; AV Vaccine_ CVX_7 1 d_6 Name_6	, _,			When cochlear implant placement is being planned, PCV13 and/or PFSV23 vaccination should be completed at least 2 weeks before surgery or initiation of therapy.	n_Test_Ty pe		e n Updated to reflect the correct forecasting date, added
						All Valid: Forecast		Recommen description ded based :
OC 0153		2	07/03/2013	3 07/03/2013	When cochiese implant placement is being planned, PCV13 and/or PSV23 vaccination should be completed at least 2 weeks before surgery or initiation of therapy.	02/12/2016 Test	08/30/2016	01/17/2019 Condition 4. Added description
DC-0154		3	04/08/2016	6 04/08/2016	When cochlear implies placement is being glazemed. PO/33 and/or PP/323 vaccination should be completed at least 2 weeks before surgery or initiation of therapy.	All Valid: Forecast 02/12/2016 Test	08/30/2016	Récommen ded based on 01/17/2019 Condition 4. Added description
UC-0335			06/03/2016	6 06/03/2016	When cocklear implant placement is being planned; PCV3 and/or PPV32 and accuration should be completed at east 2 weets before sugery or instation of therapy.	All Valid: Forecast 04/08/2016 Test	08/30/2016	Recommen ded based on 01/17/2019 Condition 4. Added description
JC 0156 PPR or WAL Valid Risk		5	05/17/2077	7 05/17/2077	Pneumococcal	All Valid: Forecast 05/21/2016 Test	08/31/2016	Recommen ded based on 01/17/2019 Condition Updated to add Past Due date,
UC 0157		1	03/08/2003	3 03/08/2003 03/07/:	062 Pneumococcal	No Doses Administer 04/16/2016 ed	08/30/2016	Recommen added description on 01/17/2019 Condition 4 added description
OC 0138		2	03/08/2062	2 03/08/2062	Pneumococcal	All Valid: Forecast 04/16/2016 Test	08/30/2016	Recommen ded based on 01/17/2019 Condition 4 added description
UC 0139		:	09/14/2014	4 09/14/2014	Preumococcal	No Doses Administer 09/14/2016 ed	09/01/2016	Recommen ded based on 01/17/2019 Condition 4 Added description
UC 0140		2	11/09/2016	6 11/09/2016	Prevmococcal	All Valid: Forecast 09/14/2016 Test	09/01/2016	Recommen ded based on 01/17/2019 Condition 4 Added description
occisi		3	09/14/2073	3 09/14/2073	Preumococcal	All Valid: Forecast 11/09/2016 Test	09/01/2016	Recommen ded based on 01/17/2019 Condition 4 Added description
or ones		2	06/27/2016	6 06/27/2016	Preumococcal	All Valid: Forecast 05/02/2016 Test	09/01/2016	Recommen ded based 01/17/2019 Condition 4 description
ocoss		3	03/16/2066	6 03/16/2066	Preumococial When cochlear implant placement is being planned, PCVI3 and/or PFVI3 varicantion should be completed at least 2	All Valid: Forecast D6/27/2016 Test	09/01/2016	Recommen ded based on 01/17/2019 Condition 4. Update to reflect the correct
UC-0154		2	08/01/2017	7 08/01/2017	weeks before surgery or initiation of therapy. Pneumococcal When cochiear implant placement is being planned, PCV13 and/or PFSV23 vaccination should be completed at least 2 weeks before surgery or initiation of	All Valid: Forecast 08/01/2016 Test	09/02/2016	Recommen date date date date date date date date
					therapy.			Recommen added description ded based

CDC_Test_ID NVX_4 Evaluatio Series_Ty Evaluatio Date_Add Vaccine_CXX_5 MVX_5 Evaluatio Series_Ty Evaluatio Date_Add Vaccine_CXX_7 MVX_7 Evaluatio Series_Ty Evaluatio	Assessment_Date Recommende Past_Due_Da Administrative_Guidance Vaccine_Group Assessment_Date Evaluatio Date_added Date_updated Forecast_Reason_F Changed_n_eat. When elective splenectomy is being planned_RPX13 and/or PPX23 vaccination should be completed at least 2 vaccination should be completed at least 2 vaccination. Should be completed at least 2 vaccination should be completed at least 2 vaccination. Should be
2036-UC-0366-PFR Valid standard	All Value Recommends 5 07/16/2012 07/16/2012 Presumonoxical GA/21/2012 Text 05/02/2036 05/08/2013 Condition 4.0 When elective splenectory is being planned, PCV31 and leaf of the splene
2016-U-C0507 PFR Valid standard BERESERRE PPSV 23 33 MSD Valid Risk	All Valid: Recommen 6 01/28/2021 01/28/2021 When elective splenectomy is being planned, PCV33 and/or PSV23 When elective splenectomy is being planned, PCV33 and/or PSV23 vaccination should be completed at least 2 weeks before suggery or inflation of thesapy.
2016-UC-0168 PFR Valid standard sessesses PP3V 23 33 MSD Valid Risk 09/78/2021 PP3V 23 33 Valid Risk	All Valid: Recommen All Valid: ded based Forecast 7 G3/21/2075 G3/21/2075 Prevanococcal G5/28/2011 Test G5/02/2016 G3/27/2013 Condition 4.0 Added description
2036-UC-0269	All Valid: Becommen All Valid: ded based forecast on 2 07/27/2016 07/27/2016 Pre-umococcal 06/01/2016 Text 09/02/2036 01/29/203 Condition 4.0 Added description
2016-05-0170	All Valid: Recommen All Valid: Recommen ded based forecast on 4. 3 66/01/2011 66/01/2011 Precumococcal 07/27/2016 feet 09/02/2016 01/29/2013 Condition 4.0 Added description
2016-UC-0271.	All Value Recommen All Value German Forecast 4 04/11/2072 04/11/2072 Presumosoccal 06/01/2011 Test 09/02/2016 01/29/2019 Candition 4.0 Updated earliest and recommen forecast
2016-UC-0372	date to 1 years per
2016-UC-0175	year after year after most protous Al Valid: Recomment form of de based PRVIZI, 3 08/21/2021 08/21/2021 Preumococcal 08/21/2017 Test 08/02/2016 12/02/2019 Candition Added description 4,1 Added description
2016-UC-0174	All Yold: Recommen All Yold: Recommen forecast forecast 4 04/13/2059 04/13/2059 04/13/2059 Presumococcal 08/12/2022 Text 09/02/2016 01/99/2013 Candition 4.0 Added description
2016-UC-0175	All Value: Recommen All Value: Ged based forecast 06/11/2016 06/11/2016 Presumosoccal 04/16/2016 Text 08/06/2016 01/28/2019 Condition 4.0

CDC_Test_ID MVX_4	Evaluatio Series Ty Evaluatio Date_Ad Vaccine_ CVX_5 MVX_5 Evaluatio Series_Ty n_Status_ pe_4	Fouluatio Date_Admin Vaccine_ CVX_6 M/VX_6 Evaluatio Series_TyV n_Reason istered_6 Name_6 n_Statuspe_6 _5 6	Evaluatio Date_Ad Vaccine_ CVX_7 M/VX_7 n_Reason ministere Name_7	Evaluatio Series Ty Evaluatio Forecast_ n_Statuspe_7 n_Reason # 7	Earliest_Date Recommende Past_Due_ d_Date te	Da Administrative_Guidance	Vaccine_Group .	Assessment_Date Evaluatio C n_Test_Ty pe	ate_added Dat	te_updated Forecast_ Reason_F Changed_ Test_Type or_Chang in_Versio e e n Removed the past due date Additional to the control of the control
2016-UC-0176					s 04/04/2067 04/04/2067		Pneumococcal	All Valid: Forecast 06/11/2016 Test	09/06/2016	Recommen ded based on 12/02/2019 Gardino Added decrypton and Updated past due date
2016-UC-0177				:	3 08/03/2012 08/03/2012		Pneumococcal	All Valid: Forecast 08/03/2011 Test	09/06/2016	Recommen ded based on 01/29/2019 Condition 4.0 Added Past Due date, added
2016-UC-0178					4 07/02/2051 07/02/2051 07/02/2C	351	Pneumococcal	All Valid: Forecast 08/03/2012 Test	09/06/2016	description Recommen ded based of 12/29/2019 Condition Updated to reflect an additional contraindic attor/(beer
2016-UC-0179							Japanese Encephalitis	All Valid: Forecast 05/15/2018 Test	08/23/2016	vation. Not recommen ded: Containdic CU179/2019 atom Added description
2016-UC-0180							Japanese Encephalitis	All Valid: Forecast 11/01/2015 Test	08/23/2016	Not recommen ded: containdic 01/29/2019 ation 4.0 Added description
2016-UC-0181				,	1 09/24/1976 09/24/1976		Rabies	No Doses Administer 08/01/2016 ed	08/25/2016	Recommen ded based on 02/25/2019 Condition Updated CVX code from 18 to 175/176,
2016-UC-0182				ī	z 08/08/2016 08/08/2016		Rabies	All Valid: Forecast 08/01/2016 Test	08/25/2016	Recommen description on O2/25/2019 Condition 4.D Updated Past Due date,
2016-UC-0183				:	3 08/22/2016 08/22/2016 08/28/20	The 2 year booster should only be given after a serum sample has been tested for rables virus neutralizing antibody. The booster should be administered if the		All Valid: Forecast 08/08/2016 Test	08/25/2016	added description defecting to the comment of the c
2016-UC-0184					4 08/22/2018 08/22/2018	serum titer failt to maintain a value of at least complete neutralization of a 1.5 serum dilution by rapid fluorescent focus inhibition test.		All Valid: Forecast 08/22/2016 Test	08/25/2016	Recommen effect 2 years after the last 4.0 Updated to reflect an additional contraindic
2016-UC-0185							Rables	All Valid: Forecast 07/29/2016 Test	08/26/2016	Not attion or attion or recommen observation of the contrained of
2016-UC-0186							Rables	All Valid: Forecast 01/13/2016 Test	08/26/2016	Not alton or observatio observatio observatio oded: a, added a decription occupant of the control of the contro
2016-UC-0187						This vaccine should be given at least 2 weeks before potential exposure. Primary vaccinitation with live-attenuated Ty212 vaccine consists of one enteric-coated capute taken on alternated days (day 0, 2, 4, and 6), for a total of four caputes. The capute must be kept	Yellow Fever	All Valid: Forecast 03/13/2016 Test	08/22/2016	Recommen deed based on 12/25/2019 Condition Updated to referc an additional Condition/ observation in and updated booster
2016-UC-0188				3	3 07/10/2026 07/10/2026	refrigerated (not frozen). Each capsule should be taken with cool water no warmer than 98.6°F [37.0°C], approximately 1 hour before a meal. All doses should be completed at least 1 were should be completed at least 1 were	^{sk} Typhoid	All Valid: Forecast 07/10/2021 Test	08/29/2016	dose to be Recommen administer deel based ed at 5 on years later. 03/04/2019 Condition 4.0

CDC_Test_ID MVX_4	Evaluatio Series_Ty Evaluatio Date_Ad Vaccine_ n_Status_ pe_4	CVX_S MVX_S Evaluatio Series_Ty Ev	raluatio Date_Admin Vaccine_ CVX_6 N	IVX_6 Evaluatio Series_Ty Evalua	atio Date_Ad Vaccine_ CVX_7 MV.	_7 Evaluatio Series_Ty Evaluatio Forec	ast_ Earliest_Date Recommende F d_Date t	Past_Due_Da Administrative_Guidance	Vaccine_Group	Assessment_Date Evaluatio	Date_added Da	te_updated Forecast_ Reason_F Changed_ Test_Type or_Chang In_Versio
	n_Status_ pe_4	s _5	Reason istered_6 Name_6	n_Status_ pe_6 n_Rea 66	d_7	n_Status_ pe_7				pe		e n Updated to
												reflect an additional
												contraindic ation/obser
										All Valid:		Recommen vation. ded based
2016-UC-0189									Typhoid	Forecast 08/15/2016 Test	08/22/2016	on 03/04/2019 Condition 4.0 Updated to
												reflect an additional
												Condition/ observatio
										No Doses		Recommen n. Also updated on past Due
2016-UC-0190							1 07/22/2000 07/22/2000	07/21/2059	Pneumococcal	Administer 10/13/2016 ed	08/22/2016	on date. 4.0
												Updated to reflect an additional
												Condition/ Recommen - bosontia
2016-UC-0191							2 07/22/2059 07/22/2059		Pneumococcal	All Valid: Forecast 10/13/2016 Test	08/22/2016	ded based n. on 03/04/2019 Condition 4.0
2016-00-0191							2 07/22/2039 07/22/2039		Priedmotoccal	10/15/2016 1651	08/22/2016	Updated to reflect
												correct Past Due
										No Doses		Recommen ded based
2016-UC-0192							1 08/14/1971 08/14/1971	08/13/2030	Pneumococcal	Administer 07/12/2016 ed	08/26/2016	on 03/04/2019 Condition 4.0
												Updated to reflect an
												additional Condition/ observatio
										All Valid:		Recommen n. ded based
2016-UC-0193							2 08/14/2030 08/14/2030		Pneumococcal	Forecast 07/12/2016 Test	08/26/2016	on 03/04/2019 Condition 4.0 Added
												description
												Recommen
										No Doses Administer		ded based on
2016-UC-0194							1 03/23/2007 03/23/2007		НерВ	05/19/2016 ed	08/30/2016	03/04/2019 Condition 4.0 Added
												description
										All Valid: Forecast		Recommen ded based on
2016-UC-0195							2 06/16/2016 06/16/2016		НерВ	05/19/2016 Test	08/30/2016	03/04/2019 Condition 4.0 Updated
												Earliest and
												Recommen ded to
										All Valid:		Recommen represent a ded based interval
2016-UC-0196							3 09/19/2016 09/19/2016		НерВ	Forecast 06/16/2016 Test	08/30/2016	on after the 1st doos Updated the third
												the third dose to
												reflect 4 mos from
										All Valid:		Recommen dose #1, added ded based general
2016-UC-0197									НерВ	Forecast 09/19/2016 Test	08/30/2016	03/14/2019 Condition description 4.0
												Updated to reflect an Earliest
												and Recommen
												ded data of 07/13/79.0 7/13/1979,
												7/13/1979, added description
										No Doses		Recommen · ded based
2016-UC-0198							1 07/13/1979 07/13/1979		Meningococcal	Administer 08/02/2016 ed	08/02/2016	on 03/14/2019 Condition 4.0
												Updated to reflect an additional
												contraindic
										All Valid:		Not atton/obser recommen vation. ded:
2016-UC-0200									НерВ	Forecast 02/12/2016 Test	08/26/2016	contraindic 03/14/2019 ation 4.0
												Updated to reflect an
										All Valid:		accinonal
2016-UC-0201									Rabies	All Valid: Forecast 04/27/2016 Test	08/26/2016	ded: ation/obser contraindic vation. 4.0
								Pregnant women who do not have evidence of immunity should receive Mi vaccine upon completion or termination	AR of			description Not
								pregnancy and before discharge from the health care facility.	e	No Doses Administer		recommen ded:
2016-UC-0202 2016-UC-0203									MMR MenB	08/09/2016 ed	08/09/2016	contraindic 03/14/2019 ation 4.0
2016-00-0203									MICHE	06/28/2016 All Valid: Forecast Test	CO/13/2016 03	14/2019 Not Updated to recommen reflect an ded: additional
												contraindic contraindic ation ation/obser
												vation. Added
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									HPV	01/23/2016 All Valid: Forecast Test	01/09/2017 03	14/2019 Recommen Updated to ded based reflect an on additional
										iest		Condition Condition/ observatio
												D.

2017-0/C-0001 4.0

CDC_Test_ID MVX_4 Evaluatio Series_Ty Evaluatio Date_Ad Vaccine_ CVX_5 MVX_5 Evaluatio Series_Ty Evaluatio Date_Admin Vaccine_ CVX_6 MVX_6 Evaluatio Series_Ty Evaluatio Date_Ad Vaccine_ CVX_7 MVX_7 Evaluatio Series_Ty Evaluatio Accine_ CVX_6 MVX_6 Evaluatio Series_Ty Evaluatio Date_Admin Vaccine_ CVX_6 MVX_6 Evaluatio Series_Ty Evaluatio Date_Ad Vaccine_ CVX_7 MVX_7 Evaluatio Series_Ty Evaluatio Series_Ty Evaluatio Date_Admin Vaccine_ CVX_6 MVX_6 Evaluatio Series_Ty Evaluatio Date_Admin Vaccine_ CVX_7 MVX_7 Evaluatio Series_Ty Evaluatio Date_Admin Vaccine_ CVX_6 MVX_6 Evaluatio Series_Ty Evaluatio Date_Admin Vaccine_ CVX_7 MVX_7 Evaluatio Series_Ty Evaluatio Date_Admin Vaccine_ CVX_6 MVX_6 Evaluatio Series_Ty Evaluatio Date_Admin Vaccine_ CVX_7 MVX_7 Evaluatio Series_Ty Evaluatio Date_Admin Vaccine_ CVX_6 MVX_6 Evaluatio Series_Ty Evaluatio Date_Admin Vaccine_ CVX_7 MVX_7 Evaluatio Date_Admin Vaccine_ CVX_7 MVX_7 Evaluatio Date_Admin Vaccine_ CVX_7 MVX_7 Evaluatio Date_Admin Vaccine_ CVX_6 MVX_6 Evaluatio Date_Admin Vaccine_ CVX_6 MVX_6 Evaluatio Date_Admin Vaccine_ CVX_7 MVX_7 Evaluatio Date_Admin Vaccine_ CVX_7 MVX_7 Evaluatio Date_Admin Vaccine_ CVX_7 MVX_7 Evaluatio Date_Admin Vaccine_ CVX_6 MVX_6 Evaluatio Date_Admin Vaccine_ CVX_7 MVX_7 Evaluatio Date_Admin Vaccin	aluatio Forecast_ Earliest_Date Recommende Past_Due_Da Administrative_Guidance Reason # d Date te	Vaccine_Group Assessment_Date	Evaluatio Date_added Date_updated Forecast_ Reason_F Changed_ Test_Typ coChang inVersio
4 _4 _6.5	1 10/01/2010 10/01/2012 10/2N/2014	16°V 03/03/25	No Douss 0/10/2017 12/02/2019 Recommen added a 4.1 defenimenter ed fel based part fue det based part fue det based part fue det condition reflect an additional Condition/ observation fuel fuel fuel fuel fuel fuel fuel fuel
2017-4-0-0002	2 03/05/2017 03/05/2017 04/75/2017	01/03/20 HPV 01/08/2017	13 All Valuell: 02(52/2017 12/52/2019 Recommen Added paul forecast of concent and a feet based due date and a feet based due to the concent and added a condition description
2017-UC-0008	3 04/08/2017 07/08/2017 09/04/2017	HPV	All Valid: 02/02/2017 03/18/2019 Recommen Added for Forecast of the forecast on on Condition
2017-UC-0004		97/08/25	017 All Valid: 03/02/2017 03/18/2019 Recommen Added Forecast delabased description on Condition
2017-UC-000S	1 06/02/2014 06/02/2016 06/29/2018	.09/30/22 HPV 08/01/2016	1017 No Doses 02/02/2017 12/02/2019 Recommen Addref gast of Administer defect based due date on Addref ed Condition description
2017-UC-0007	2 08/29/2016 08/29/2016 11/70/2016	HPV 08/01/2016	All Valid: 02/02/2017 03/08/2019 Recommen Added 4.1 forecast of based decryption of the condition Condition
2017-UC-0008	3 01/01/2017 02/01/2017 03/28/2017	HPV 08/29/2016	All Vallet: 02/02/2017 12/02/2019 Recommen Updated debased carellet, Test on recommen Condition ded, and past due date description defended description defended description description description description description
2017-UC-0009		HPV 01/23/2017	All Valid: 02/02/2017 03/76/2019 Recommen Added Forecast Test on Condition
2017-0-0-010	1 09/02/2005 09/03/2005	Men8	No Douce 03/20/2017 03/26/2019 Recommen Added Administrator on ed Condition
2017-05-0011	2 03/30/2017 03/30/2017	03/02/2017 Menß 03/02/2017	All Valid: 03/20/2017 12/02/2019 Recommen Updated of based recurries from Condition from Condition from 03/20/2012 7 to 03/20/2012 1 to 03/20/
2017-UC-0012	3 07/13/2020 07/13/2020	Meningococcal	description 4.1 Hi Vallet: 03/20/2017 03/26/2019 Recommen Added description Test Condition Condition
2017-0-0014	1 02/17/2000 02/17/2000	07/13/2015 Cholera	No Doses 07/18/2017 03/28/2019 Recommen Added Administer on call of the commen Added Gerapiton on Condition
2017-UC-0015		07/18/2017	4.0

CDC_Test_IO MVX_4 Evaluatio Series_Ty Evaluatio Date_Add Vaccine_CVX_5 MVX_5 Evaluatio Series_Ty Evaluatio Date_Admin Vaccine_CVX_6 MVX_6 Evaluatio Statuspe_4	Series_Ty_Evaluatio Date_Ad_Vaccine_CVX_7 MVX_7 Evaluatio Series_Ty_Evaluatio Forecast_Earliest_Date_Recommende Past_Due_Da_Administrative_Guldance_pe_6_n_Reason ministere Name_7 n_Status_pe_7 n_Reason # d_Date_te		Assessment_Date
2017-UC-0018 2017-UC-0017		Cholera MenB	No Doses 08/22/2017 12/202/2019 Nor Added A.D. Addinister recommence Observation of Contraction
2018-UC-0001	3 OL/02/2023 OL/02/2023	Meningococcal	Oxfort O
2018-UC-0002	1 06/27/016 06/27/016	НерВ	No Douis 12/17/2018 03/28/2019 Recommen added ded based description on Condition
2018-UC-0004	2 07/25/7018 07/25/7018 08/21/7018	НеріВ	06/27/2018 All Valid: 12/17/2018 03/28/2019 Recommen added for feet ending from the Condition Condition
2013a-UC-0005		Нерів	07/75/2018 All Void: 12/17/2018 03/78/2019 Recommen added for forecast ded laund description first Condition
2018-UC-0006			Added 4.0 Booster score informatio
.019-UC-0001	1 04/29/2019 04/29/2019	Japanese Encephalitis Pneumococcal	All Valid: Recommend ded based on Forecast No. 2017/19/2019 Off/20/2019 Off/20/2019 Condition 4.0 Condition No. Douts Recomment Recommend del Condition Condition Condition Condition Condition Condition Condition Condition
2018-UC-0002	2 08/26/230 08/26/2039	Pneumococcal	07/01/2019 07/10/2019 07/10/2019 4.0 All Valid: Recommen Forecast del based Test on Condition
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2018-UC-0009	GB_GB_2020 GB_GB_2020 GB_GB_2020	Pneumococcal	All Value: Recommen Comman Com
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3019-UC-0012	30/04/2019 10/04/2019 11/01/2619 3	НерВ	All Valid: Recommen All Valid: ded based Fonecat! on On(NoI/2019 Text 12/NoI/2019 13/NoI/2019 Condition All Valid: ded based Fonecat! on
2019-UC-0013	11/01/2019 11/01/2019	НерВ	10/04/2019 Test 12/06/2019 12/06/2019 Condition

CDC_Test_ID MVX_	Evaluatio Series_Ty Evaluatio Date_Ad Vaccine_ CVX_5 MV: n_Status_ pe_4	IX_5 Evaluatio Series_Ty Evaluatio Date_Admin Vaccine_ CVX_6 M n_Status_ pe_5	VX_6 Evaluatio Series_Ty Evaluatio Date_Ad Vaccine_ CVX_7 MVX_ n_Status_pe_6	7 Evaluatio Series_Ty Evaluatio Forecast_ Earliest_Date Recommende Past_Due_Da Administrative_Guidance n_Status_pe_7 n_Reason # d_Date te 777	Vaccine_Group	Assessment_Date Evaluatio Date_added Date	te_updated Forecast_ Reason_F Changed_ Test_Type or_Chang In_Versio e n
2019-UC-0014				* 11/29/2019 11/29/2019 -	НерВ	All Valld: Forecast 11/01/2019 Test 12/06/2019	Recommen ded based on 12/06/2019 Condition
2019-UC-0015 DVX	Valid risk				НерВ	All Valid: Forecast 11/29/2019 Test 12/06/2019	Recommen ded based on 12/06/2019 Condition